



Regina Qu'Appelle

REGIONAL HEALTH AUTHORITY

ANNUAL REPORT 2006-2007



QUALITY

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To view the Regina Qu'Appelle Regional Health Authority Annual Report visit www.rqhealth.ca

LETTER OF TRANSMITTAL

The Honourable Len Taylor
Minister of Health
Room 346, Legislative Building
Regina, SK S4S 0B3

The Honourable Graham Addley
Minister of Healthy Living and
Minister Responsible for Seniors
Room 345, Legislative Building
Regina, SK S4S 0B3

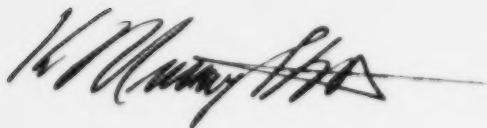
Dear Mr. Taylor and Mr. Addley,

On behalf of the Regina Qu'Appelle Regional Health Authority (RQRHA) and its board, I am pleased to submit the 2006-2007 annual report. This report is submitted in accordance with the requirements of *The Regional Health Services Act* and *The Tabling of Documents Act*.

The health region continues to remain focused on Saskatchewan Health's vision of "*building a province of healthy people and healthy communities*" and is committed to providing quality, accessible health services for the people it serves.

Throughout our annual report, we have focused on the RQHR's three priority objectives: improve service quality and patient safety; create a safe, supportive and quality workplace; and improve access and service delivery. These objectives are the foundation of the health region's strategic direction and guide all our actions.

Sincerely,



K. Murray Knuttila
Chairperson
Regina Qu'Appelle Regional Health Authority

REGINA QU'APPELLE HEALTH REGION: COMMITTED TO THE PEOPLE WE SERVE

THE REGINA QU'APPELLE STRATEGIC FRAMEWORK

The Regina Qu'Appelle Health Region's (RQHR) strategic framework outlines the region's long-term direction in providing services that enhance the health of the people within its communities. The framework includes the region's vision, mission, values, philosophies and strategic themes.

In September 2006 the RQHR and Senior Management Team, in consultation with the Community Advisory Networks, reviewed the strategic framework to validate the long-term direction set by the region. The review included an extensive environmental scan completed last summer and information obtained from community consultation sessions held throughout 2005 and 2006.

As a result of the additional input, the strategic framework was updated with an increased emphasis on safety. The number of strategic themes also went from seven to six, reflecting the current and future needs of our community.

The region provides specialized health care for 465,000 residents in southern Saskatchewan through the two designated provincial hospitals in Regina. The RQHR is one of Canada's most integrated health providers. It offers a full range of hospital, rehabilitation, community and public health, long term care and home care services.

The RQHR is ultimately accountable for the overall management and control of the health system. It has accountability to the Minister of Health for achieving provincial and regional health goals and objectives of health services.

VISION

Healthy people, families and communities

MISSION

We are a provincial and community provider of a full range of safe, quality health services, education and research that inspires public confidence. We achieve success in meeting the diverse health needs of our communities through the strength of our people, partnerships and personal responsibility for health.

VALUES

Together we succeed through...

Compassion: Our caring approach to people, families and communities.

Respect: Honesty, trust and valuing diversity as well as similarity will guide all relationships, decisions and actions.

Collaboration: Relationships built upon a shared vision, trust, open communication, involvement and genuine recognition for people's and partners' contributions.

Knowledge: Continuous improvement and effective decision-making based on the pursuit of knowledge, evidence, standards of practice and sound ethics.

Stewardship: Accountability for the people and resources entrusted to us, and the courage to do what is right.

PEOPLE PHILOSOPHY

People are our passion. By putting people first we are able to achieve our mission and fulfill our vision through a service environment built on mutual respect, collaboration and teamwork. The Regina Qu'Appelle Health Region is working towards practicing our people philosophy consistently and striving to live our values in our everyday worklife.

LEADERSHIP PHILOSOPHY

Leadership is about choice...

Leadership is about people...

Leadership is choosing "People are our Passion"

Leadership is a key foundation of a successful organization and is the core of our culture. Everyone in our organization can be a leader. The substance of leadership comes from the leader's values, self-awareness, dedication to ongoing learning, courage, vision... and the ability to demonstrate with action rather than just words.

Leadership is about people... working together to envision, and achieve, a preferred future. It is the ability to inspire, nurture, and mentor others toward a common vision through shared values that are based on relationships and respect.

REGINA QU'APPELLE HEALTH REGION'S OPERATING PLAN: OUR MAP TO THE FUTURE

WHAT IS THE REGIONAL OPERATING PLAN?

The 2004-2009 RQHR Operating Plan is the map that will lead the health region to its vision, and preferred future state.

The Operating Plan lays out the steps the RQHR is going to take to achieve its six strategic themes. There are 20 objectives that support the strategic themes. The region selected these objectives to focus efforts and resources and ensure the organization becomes the health care provider envisioned in its mission. To achieve each of the objectives, there are specific program initiatives that will be undertaken by various areas of the region.

As each year passes, the objectives may change as program initiatives are completed and goals are achieved. But what will remain constant are the values, especially the people and leadership philosophies.

WHAT ARE THE OBJECTIVES OUTLINED IN THE REGIONAL OPERATING PLAN?

The 20 objectives that support the six strategic themes are:

STRATEGIC THEME 1: ACHIEVE SUSTAINABLE QUALITY SERVICES

Provide appropriate, safe and trusted services within available resources.

Objectives

1. Improve service quality and patient safety.
2. Deliver services within available resources.
3. Achieve appropriate asset and infrastructure to support core services.
4. Improve information, tools and processes to support decision-making and effective resource management.
5. Improve efficiencies in service delivery.
6. Be prepared to sustain services during epidemic or major disasters.
7. Fulfill and influence accountabilities to the Minister of Health.
8. Define and implement a long-term vision of sustainable quality service.
9. Enhance reputation.

STRATEGIC THEME 2: ADVANCE A POSITIVE INNOVATIVE WORK ENVIRONMENT

Enhance the individual experience through a work environment which fosters respect, pride, accountability and "living our values."

Objectives:

10. Achieve sufficient number and effective mix of health care professionals who are used fully to provide safe quality care.
11. Provide a safe, quality workplace.
12. Enhance participation of aboriginal people in all RQHR occupations.
13. Improve labour relations environment.
14. Redefine and enhance medical leadership and partnerships.

STRATEGIC THEME 3: ENHANCE ABORIGINAL HEALTH

Improve the health status and outcomes of aboriginal people by offering holistic service delivery, supporting traditional ways of healing and engaging the voice of the community.

Objectives:

15. Improve capacity to support and re-orient health services that are culturally appropriate and effective.

STRATEGIC THEME 4: FOSTER POPULATION WELL-BEING

Promote individual and community wellness through actions addressing the determinants of health and encouraging individual and social responsibility for health.

Objective:

16. Improve access to basic primary health care.

STRATEGIC THEME 5: ENHANCE SPECIALIZED SERVICES

Strengthen RQHR as a provincial resource and referral centre through the determination of services best delivered in our region, Saskatchewan and in Western Canada.

Objective:

17. Improve access and service delivery.

STRATEGIC THEME 6: ADVANCE KNOWLEDGE, TEACHING AND RESEARCH

Enhance our performance as an academic health services organization that supports, creates and applies knowledge through research, learning partnerships and personal and professional development.

Objectives:

18. Achieve health innovation by developing new and better ways of providing services using technologies like the Electronic Health Record.
19. Develop and strengthen health research capacity, activity and application in priority areas.
20. Advance a culture of innovation and learning, including the education and training of the next generation of health care professionals, along with our education partners.

LEADERSHIP

Murray Knuttila (Chairperson)
Lloyd Boutilier (Vice Chairperson)
Anita Bergman
J. Patrick (Pat) Connolley
Loretta Elford
Marie Everett

Tyronne Fisher
Bryan Leier
Bev Poitras
Gary Semenchuck
Alex Taylor
C.R.H. (Chuck) Ward

For biographical and contact information regarding the members of the Regina Qu'Appelle Regional Health Authority, visit our website at www.rqhealth.ca.

REGINA QU'APPELLE HEALTH REGION ORGANIZATIONAL STRUCTURE



SENIOR MANAGEMENT TEAM

Dwight Nelson
President & Chief Executive Officer
 Keith Dewar
Senior Vice President, Health Services
 Dr. Brian Laursen
Senior Vice President, Medical Services
 Dr. David Ahmed
Vice President, Medical Services
 Jane Lindstrom
Acting Vice President, Operations Support

Carol Klassen
Vice President, Corporate Services & Chief Financial Officer
 Michael Redenbach
Vice President, Primary Health Care
 Diane Larrivee
Vice President, Specialty Care
 Jane Lindstrom
Vice President, Human Resources
 Sue Neville
Vice President, Restorative & Continuing Care

Since the region was formed in 2002, the RQHR Board and Senior Management Team have used strong strategic planning and governance focused on the next five to 10 years. The strategy includes vision, mission, values and people philosophy, as well as strategic themes. External community groups and RQHR staff and physician groups were consulted in developing the organization's strategic framework. The region's governance and strategic framework closely aligns with Saskatchewan Health's vision for the province, "building a province of healthy people and healthy communities."

MEDICAL ADVISORY COMMITTEE (AS OF MARCH 31, 2007)

Dr. D. Ahmed
 Dr. E. Alport
 Dr. F. Bowen
 Dr. E. Busse
 Ms. D. Calder
 Dr. G. Carson
 Dr. N.G. Devitt
 Mr. K. Dewar
 Dr. T. Diener
 Dr. S.B. Holmes
 Dr. D. Jones
 Ms. C. Klassen
 Ms. D. Larrivee
 Dr. B. W. Laursen

Dr. J.H. Lombard
 Dr. J.D. McHattie
 Dr. J.S. McMillan
 Dr. D. Natarajan
 Mr. D. Nelson
 Ms. S. Neville
 Dr. M. Ogrady
 Dr. P. Popkin
 Mr. M. Redenbach
 Dr. G. Sridhar
 Dr. S. Suri
 Dr. S. Van der Merwe
 Dr. C. Vuksic
 Dr. G. White

MEDICAL STAFF ASSOCIATION (AS OF MARCH 31, 2007)

Dr. G. Sridhar (President)
 Dr. M.P. Fink
 Dr. G.J. Garbe
 Dr. R.P. Knaus
 Dr. J.H. Lombard
 Dr. J. Rice
 Dr. C. Vuksic (Vice President)

The RQHR's strategic framework, in particular the values and people philosophy, has become the guiding force in how the region conducts itself in all relations with staff, physicians, patients and family members.

A CONTINUUM OF CARE:

A DIVERSE RANGE OF SERVICES

As a tertiary care centre, the RQHR provides specialized health care services to people living in southern Saskatchewan and beyond. The RQHR is one of the most integrated health services delivery agencies in the country. We offer a full range of hospital, rehabilitation, community and public health, long term care and home care services. These integrated services are offered in the areas of community services, acute care and rehabilitation.

COMMUNITY SERVICES

Community-delivered services are a vital component of an integrated health care system. Community services, in conjunction with acute care and rehabilitation services, provide a complete health care program for residents of the RQHR. These services include:

Mental Health and Addictions Services
 Long Term Care Services
 Emergency Medical Services
 Native Health Services
 Population and Public Health Services
 HealthLine
 Home Care Services

PALLIATIVE CARE

The RQHR has community health centres that provide outreach, health promotion and education services throughout the region. These centres include:

- Al Ritchie Health Action Centre (Regina)
- Cupar Health Centre
- Fort Qu'Appelle Community Health Services Centre
- Four Directions Community Health Centre (Regina)
- Grenfell Health Centre
- Long Lake Valley Integrated Facility (Imperial)
- Montmartre Health Centre
- Raymore Community Health and Social Centre (affiliate)
- Southey Health Action Centre
- Whitewood Community Health Centre

Long Term Care in the RQHR is provided by region-owned and operated facilities and by affiliates contracting services to the region. These include:

- All Nations' Healing Hospital Inc. (Fort Qu'Appelle) (affiliate)
- Balcarres Integrated Care Centre
- Broadview and District Centennial Lodge
- Cupar and District Nursing Home (affiliate)
- Eastern Saskatchewan Pioneer Lodge (Moosomin)
- Echo Lodge (Fort Qu'Appelle)

- Extencicare (Elmview, Parkside and Sunset) (Regina) (affiliates)
- Golden Prairie Home (Indian Head)
- Grenfell Pioneer Home
- Lakeside Home (Wolseley)
- Long Lake Valley Integrated Facility (Imperial)
- Lumsden and District Heritage Home (affiliate)
- Montmartre Health Centre
- Qu'Appelle Diocesan Housing (Regina) (affiliate)
- Regina Lutheran Care Society (affiliate)
- Regina Pioneer Village (affiliate)
- Santa Maria Senior Citizens Home (affiliate)
- Silver Height Special Care Home (Raymore)
- Wascana Rehabilitation Centre
- Whitewood Community Health Centre
- William Booth Special Care Home (Regina) (affiliate)

Note: the numbers in this chart are not comparable and cannot be tallied up at the bottom of a column (i.e., hours cannot be compared to number of meals)

HOME CARE SERVICES	2003-2004	2004-2005	2005-2006	2006-2007
Admissions	6,298	6,822	7,258	7,229
Nursing hours	85,169	79,244	85,860	88,154
Number of meals	52,977	48,575	45,230	39,426
Occupational therapy hours	6,037	5,644	6,112	6,153
Physical therapy hours	6,405	6,477	5,578	5,448
Support hours	7,423	6,549	6,025	3,729
Social work hours	3,607	4,116	4,099	4,215
Volunteer services hours	9,344	9,630	9,902	8,870
Home services hours	176,255	172,242	177,162	167,904

IMMUNIZATION SERVICES	2003-2004	2004-2005	2005-2006	2006-2007
Number of doses – child health clinics	18,572	19,146	27,891	33,680
Number of school children immunized in school	12,070	12,537	8,552	7,365
Adult doses – clinical visits	n/a	1,787	2,524	2,396
Influenza coverage rates – people over 65 years	70%	71%	72%	67%
Travel clinics	7,540	9,244	8,744	8,744

ACUTE CARE

Within the region are two provincial hospitals – the Regina General Hospital and Pasqua Hospital. These hospitals serve the residents of southern Saskatchewan by providing a wide range of acute care as well as specialized services.

ACUTE CARE SERVICES INCLUDE:

- Ambulatory Care Services
- Cardiosciences
- Critical Care Services
- Diagnostic Imaging Services
- Emergency Care Services
- Family Medicine
- Gastroenterology and Hepatology
- Gynecology/Urology
- Internal Medicine
- Laboratory Services
- Neurosciences
- Oncology
- Orthopedics
- Palliative Care Services
- Pharmaceutical Services
- Psychiatry
- Pulmonary Function
- Renal Care
- Respiratory Care Services
- Sleep Disorders Program
- Surgical Care Services
- SWADD (System Wide Admission/Discharge Department)
- Therapy Services
 - Occupational Therapy
 - Physical Therapy
 - Speech Therapy
- Women's and Children's Health
- Neonatal Intensive Care
- Obstetrics

The region also has seven community hospitals that provide hospital care:

- All Nations' Healing Hospital (Fort Qu'Appelle) (affiliate)
- Balcarres Integrated Care Centre
- Broadview Hospital
- Indian Head Hospital
- Moosomin Hospital
- St. Joseph's Integrated Care Centre (Lestock)
- Wolseley Memorial Union Hospital

HOSPITAL CARE UTILIZATION	2003-2004	2004-2005	2005-2006	2006-2007
Admissions	34,445	33,568	34,310	32,977
Average daily census	612	579.9	592.9	591.3
Average length of stay (days)	6.27	6.96	6.58	6.66
Births/Newborns admissions	3,082	2,877	3,106	3,171
Emergency visits	97,772	100,488	105,542	94,815
Radiology examinations	142,083	141,995	148,675	145,649
CT Scanner examinations	43,108	43,885	47,701	61,487
Nuclear medicine procedures	12,759	12,065	8,239	8,654
Physical therapy visits	83,431	92,312	95,627	116,128
Occupational therapy visits	13,557	16,006	17,790	20,168
Outpatient registrations	275,497	269,730	269,124	285,884

REGINA EMERGENCY MEDICAL SERVICES	2003-2004	2004-2005	2005-2006	2006-2007
Rural responses	562	567	556	517
Out-of-region	115	105	127	124
Interfacility	2,598	2,871	3,322	3,075
Urban responses	11,524	11,405	11,921	12,367
No-transport calls	4,188	4,065	4,152	4,579
Total calls	18,987	19,013	20,078	20,662

Regina EMS was 91 per cent compliant in responding to emergency situations in under 8:59 minutes in 2006-2007. The national standard for major urban centres is a compliance rate of 90 per cent.

ACUTE CARE SURGERY	2003-2004	2004-2005	2005-2006	2006-2007
Total number of patients on surgical wait list	11,824	10,946	9,985	9,408
Pre-admission clinic visits	6,872	6,947	6,830	6,548
Total surgeries	36,553	35,339	39,229	38,775
Inpatient surgery – day of admission	4,780	4,658	4,629	4,031
Inpatient surgery – non-day of admission	5,783	4,972	5,648	5,736
Outpatient surgery – operating room	9,773	9,082	10,760	10,767
Outpatient surgery – hospital clinic	16,217	16,627	18,192	18,241

LABORATORY SERVICES	2003-2004	2004-2005	2005-2006	2006-2007
Laboratory units	24,961,062	21,537,700	21,363,125	18,919,714

Figures for 2003-2004 are for the former Regina and Pipestone health districts.

CONCERNS REGISTERED WITH CLIENT REPRESENTATIVE	2003-04	2004-05	2005-06	2006-07
Number of concerns	978	1,089	1,488	1,973
Percentage of acute care patients registering a concern	2.84	3.24	1.47	2.32
Average time to resolve all concerns (days)	11.6	8.35	10.5	12.3
Average time to resolve non complex concerns (days)	4.0	3.65	4.4	4.9

REHABILITATION SERVICES

Rehabilitation Services are offered throughout the region. These programs are designed to help children and adults who have been ill or in an accident to regain their quality of life. These services include:

- Acquired Brain Injury Outreach
- Adult Rehabilitation Program
- Children's Program
- Functional Rehabilitation Program
- Prosthetics/Orthotics

HEALTH CARE ORGANIZATIONS

The RQHR contracts with a variety of organizations and the relationship between the region and these health providers is an important factor in the delivery of quality health care services.

The following is a list of the organizations that received funding through the health region in 2006-2007:

- 615672 Saskatchewan Ltd. (Touchwood EMS)
- Autism Resource Centre Inc.
- Backlin's Ambulance Service Ltd.
- Cosmopolitan Activity Centre
- Cupar Lions Volunteer Ambulance
- Extendicare (Canada) Inc.
- File Hills Qu'Appelle Tribal Council
- Imperial & District Ambulance
- JT Ambulance Service Ltd.
- Living Sky Ambulance
- Lumsden & Craven Seniors' Program Inc.
- Mental Health Association/Regina Branch Inc.
- Milestone Assisted Living Advisory Board
- Mobile Crisis Services Inc.
- Phoenix Residential Society Inc.
- Pipestone Qu'Appelle Association for Community Living
- Planned Parenthood Regina
- Prairie Ambulance Care (1998) Ltd.
- Rainbow Youth Centre Inc.
- Raymore Community Health and Social Centre

- Red Cross
- Regina Recovery Homes Inc.
- Salvation Army Waterston Centre
- Soo Line Ambulance
- University of Regina
- Valley Ambulance Care Ltd.

The Rainbow Youth Centre is a contracted organization that assists the RQHR achieve expectations as set out in the RQHR/Saskatchewan Health Accountability Document. In 2006-2007, the centre received \$169,379 in funding from the region.

The Centre is Regina's only multi-service, multi-cultural agency serving youth between the ages of 11 and 25 years. Rainbow strives to address social/health issues such as crime, school drop-out, illiteracy, racism, teen pregnancy and parenting, drug and alcohol abuse and basic living skills. Services include:

- Youthcare Work
- Teen and Young Parent Program
- Hot Supper Program
- Road to Employment Program
- Anger Management
- Kids First Home Visiting Program
- Substance Use and Abuse Education

Rainbow's target population includes high-risk inner-city youth. Staff work in partnership with other youth-serving agencies including the mental health staff from Child and Youth Services. Rainbow was founded in 1982 and during the last fiscal year provided service to over 1,300 youth, 89 per cent of whom are of aboriginal ancestry. This organization has created a safe, caring and healthy community of support for some of the region's most vulnerable citizens.

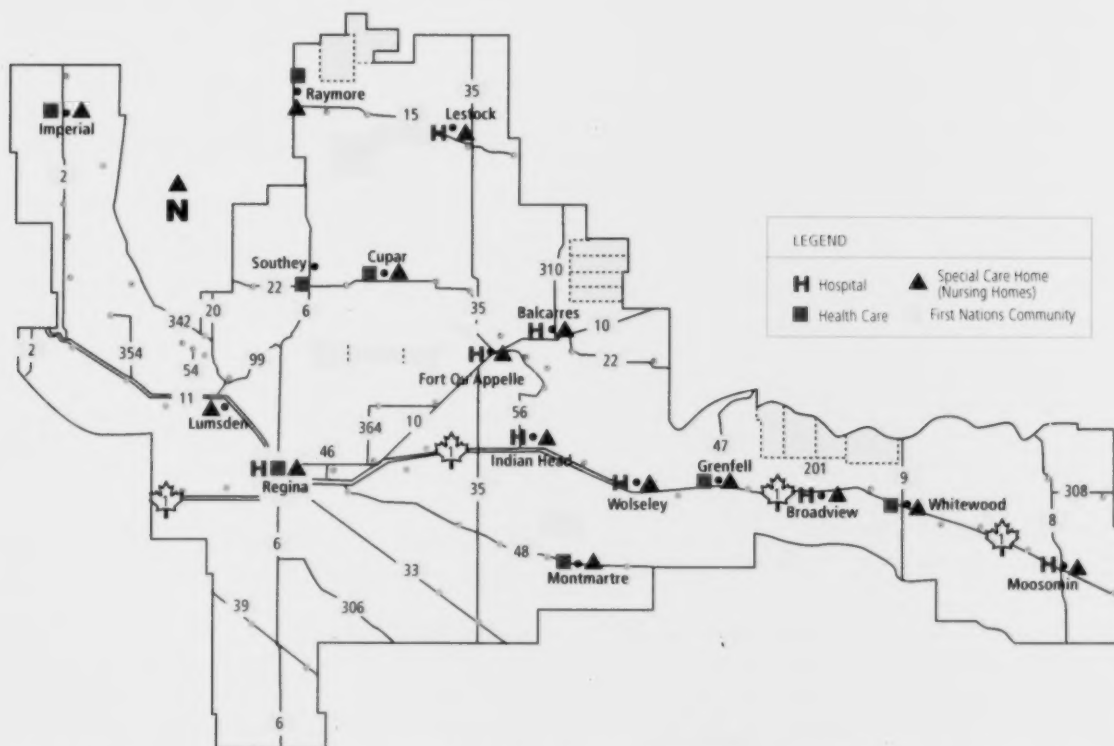
SIZE OF FACILITIES

The RQHR has facilities located throughout the region. For a list of facilities and their size, see Appendix A.

SERVICE ACCESS GUIDE

The RQHR publishes a Service Access Guide as part of both the Regina and Regina District SaskTel Phonebooks. This Guide is the "Green Pages" section, which immediately follows the blue pages of government listings. In the centre of this section is a page that outlines the institutional and community programs and services provided by the region as well as important contact information. The Services Access Guide, as well as other information about the region, can be viewed on the RQHR website at www.rqhealth.ca

OUR REGION: STRENGTHS AND CHALLENGES



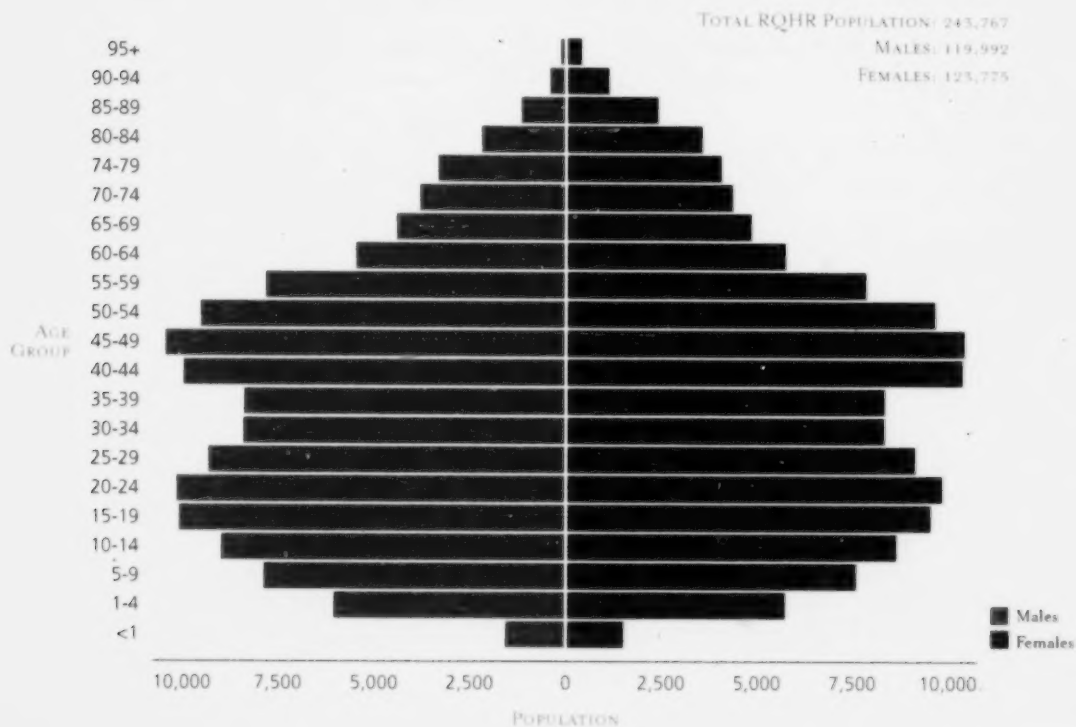
The RQHR serves a vast area in the province. It has the second-largest population as well as 17 First Nations communities. It also provides specialized health care for 465,000 residents in southern Saskatchewan through the two designated provincial hospitals in Regina. It extends from as far east as Moosomin and Rocanville and includes the City of Regina and the towns of Fort Qu'Appelle, Lumsden, Balgonie, Indian Head, Raymore and Grenfell.

In 2006, the population of the RQHR was 243,767 people. There were more males than females aged 0-24. However, the number of women increased after age 24, with the oldest age group, over age 85, having twice the number of women as men.

The age of RQHR residents is changing. The fastest-growing populations are 45 to 64 years and 75 and older.

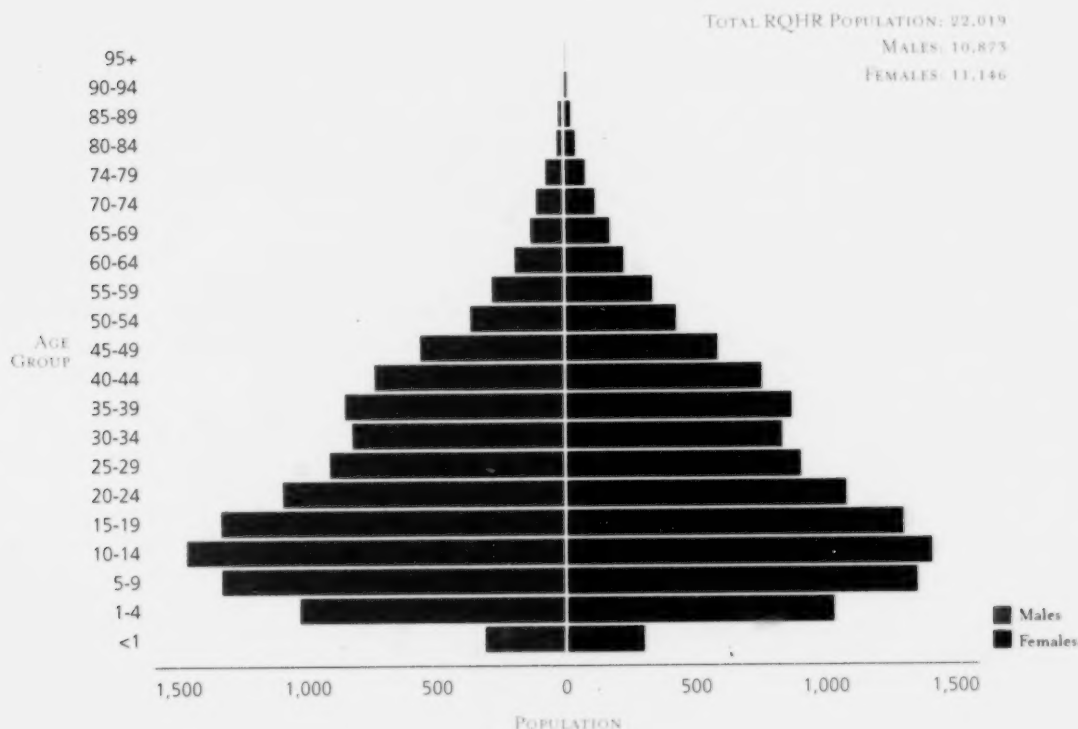
The most current data (2001) indicates that life expectancy at birth is 76.4 years for males and 81.9 years for females in the RQHR.

REGINA QU'APPELLE HEALTH REGION COVERED POPULATION, 2006



The increase in number of older people in the region reflects a trend throughout the developed world and poses new challenges for health systems everywhere. As people age, their use of health services generally increases.

REGINA QU'APPELLE HEALTH REGION REGISTERED INDIAN PERSONS COVERED
POPULATION, 2006



The RQHR works closely with First Nations and Métis communities to address their health issues and needs. One of the key areas of focus in delivering health services is the increasing number of young aboriginal people.

For further information on the population and the make up of the communities that the RQHR serves, refer to the *Health Status Report: 2004* (go to website at www.rqhealth.ca and click on Programs and Services, then open Health Status Report: 2004).

The *Health Status Report* provides information on the health of the population in the RQHR. This provides not only a "benchmark" about where the health of the population stands, but also serves as a basis for future health planning in terms of recognizing diverse needs associated with demographic structure, health status, health behaviours and prevention measures and determinants of health.

FACTORS THAT INFLUENCE HEALTH OUTCOMES

EDUCATIONAL ATTAINMENT

The number of people in the RQHR that receive their high school diplomas and achieve education beyond the secondary level has increased, based on the most current information available.

Higher education increases the possibility of obtaining a living-wage job, accessing high-quality health care and living a healthy lifestyle. As well, a mother's education level can influence a child's access to health care.

In 2001, 77.5 per cent of the RQHR population aged 20 to 64 years had at least a high school education, compared to 72 per cent in the province overall. More than 21 per cent of RQHR residents in this age group had a university certificate, degree or diploma, compared to 17.3 per cent of those in the province.

INCOME AND SOCIOECONOMIC STATUS

Poverty and low household income is associated with a broad range of adverse health outcomes such as reduced life expectancies, death due to violence, HIV/AIDS and chronic diseases such as diabetes. As well, poverty increases the likelihood of a person not having health insurance, using tobacco or drugs and being overweight or obese.

While the percentage of families living in poverty has reduced slightly, it continues to be an issue that affects the overall health of the region. In 2001, 15 per cent of households in the RQHR had an annual income below the low income cut-off (measure of poverty developed by Statistics Canada), just slightly less than the rest of the province.

In 2007, the RQHR reviewed and compared hospital discharges, physician visits and medication usage for several conditions, with low-income neighborhoods, affluent neighborhoods and all of Regina. The analysis showed that those living in low-income neighborhoods have a disproportionate burden of illness.

INJURY RATE

Injuries are leading causes of disability and premature death and result in substantial economic loss to society and individuals. Injuries include both unintentional (accidents caused by motor vehicles, falls, fires, suffocation, drowning and poisoning) and intentional (child battering, self-inflicted injuries and assaults with firearms, knives, or other objects).

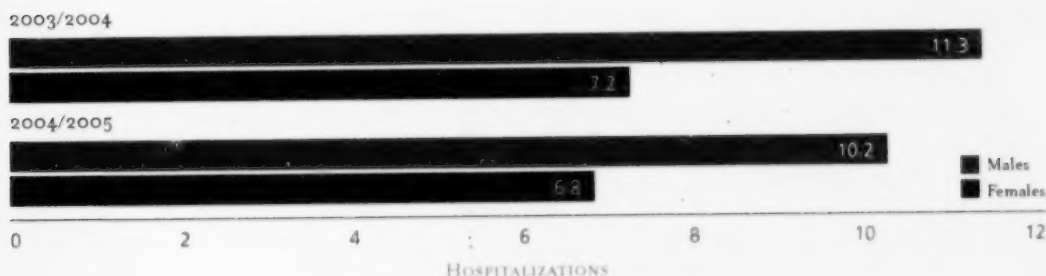
During 2004-2005, there were 10.2 per 1,000 males and 6.8 per 1,000 females aged 0-19 were hospitalized as a result of injury. Injury hospitalization rate in 0-19 years was 8.2 per 1,000, similar to the provincial rate of 8.1 per 1,000.

In 2004-2005, rates for injury hospitalization were highest in children one to four years, while the provincial injury hospitalization rates were highest in the 15-19 year age group.

Injuries are not tracked systematically unless they result in hospitalization or death. Thus, these hospital data only represent the most serious injuries among children. Intentional injuries require intervention by the police or child welfare to protect the child and prevent recurrence. Unintentional injuries, or accidents, are more common and are generally preventable.

Parent education on the importance of child-proofing the home; appropriate use of car seats and booster seats, seat belts, and helmets; fencing pools and yards; and safe storage of firearms can reduce the likelihood of accidents. Education and enforcement regarding safe driving practices for teenagers are also important in reducing motor vehicle injuries, a leading cause of injury among older children and teens.

INJURY HOSPITALIZATION RATE PER 1,000 POPULATION (AGE 0-19)



INFANT MORTALITY

Infant mortality is a well-established measure of child health and of society's well-being. It measures the number of deaths of children under the age of one. Research shows that infants with low birth weight or pre-term delivery have a higher risk of infant death. Several factors affect infant mortality such as socioeconomic status, lifestyle behaviours, prenatal care and access to medical care.

In 2005, the infant mortality rate in the RQHR was 6.2 per 1,000 live births. During the same period, the province had an infant mortality rate of 8.3 per 1,000 live births.

Infant mortality is a key issue for the region which offers several programs and services that directly address this area of need: Population and Public Health, Maternal and New Parents Programs, Primary Health Care Initiatives as well as community development initiatives, tobacco control and nutrition services.

SELF-REPORTED HEALTH STATUS

An individual's rating of his or her own health is a fundamental measure of health status. Studies worldwide have consistently shown that self-rated health is a strong and independent predictor of subsequent illness and premature death.

The majority of RQHR residents rate their health as either very good or excellent (57.2 per cent), according to the 2005 Canadian Community Health Survey. The proportion of adults reporting very good to excellent health was 52.35 per cent for Saskatchewan as a whole.

RISK FACTORS FOR CHRONIC ILLNESS

Throughout the developed world, an increasingly aging population is placing new challenges on health systems. As well, unhealthy lifestyles such as an increasingly obese population, even among young children and teenagers, presents problems and significant issues for health care delivery.

One disease that can be an indicator of unhealthy lifestyle decisions is type 2 diabetes. It is a chronic disease that often results in other health conditions such as heart disease and stroke, blindness, kidney disease and lower limb amputations, but it can often be managed, and in many cases avoided, with the right lifestyle decisions.

Based on the 2005 Canadian Community Health Survey, about 5.4 per cent of the population in the RQHR, 12 years and over, have diabetes. The estimates are based on self-reported data, which underestimates the true prevalence of diabetes as they do not include people who are unaware that they have diabetes.

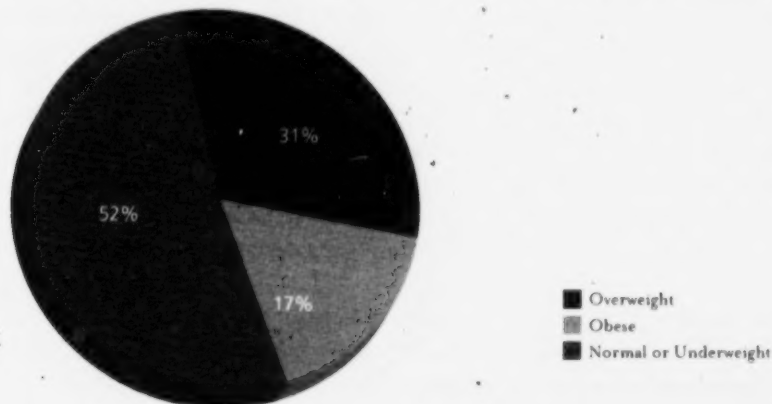
OVERWEIGHT AND OBESITY

The population aged 18 years and over who are overweight or obese is increasing throughout Canada.

A series of chronic diseases are seen in people who are overweight or obese: heart disease, diabetes, strokes, high blood pressure and some cancers. The increase in obesity has been directly linked to the current and projected increase in diabetes.

In 2005, 48.1 per cent of adults aged 18 years and over in the RQHR were either overweight or obese as compared to 56.2 per cent for the province as a whole. The prevalence of overweight and obese people in the RQHR from 2003 to 2005 remained the same.

PERCENTAGE OF POPULATION (AGE 18 TO 64 YEARS) WHO ARE OVERWEIGHT OR OBESSE



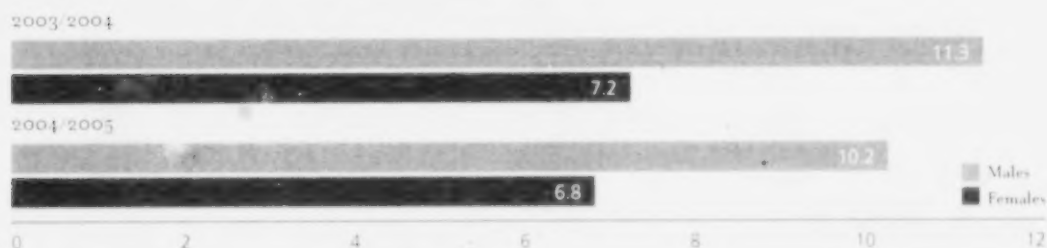
CIGARETTE SMOKING

Cigarette smoking is the single most preventable cause of premature death. It contributes to heart disease; stroke; chronic obstructive pulmonary disease; emphysema; cancer of the lung, larynx, mouth, esophagus, cervix, bladder, breast; and low birth-weight infants.

In 2005, the Canadian Community Health Survey indicated that 22.9 per cent of RQHR residents aged 12 years and over were current daily or occasional smokers, a decrease from 2003 when the rate was 24.2 per cent. The RQHR continues to offer smoking cessation programs in the community for interested people.

Parent education on the importance of child-proofing the home, appropriate use of car seats and booster seats, seat belts, and helmets, fencing pools and yards, and safe storage of firearms can reduce the likelihood of accidents. Education and enforcement regarding safe driving practices for teenagers are also important in reducing motor vehicle injuries, a leading cause of injury among older children and teens.

INJURY HOSPITALIZATION RATE PER 1,000 POPULATION (AGE 0-19)



INFANT MORTALITY

Infant mortality is a well-established measure of child health and of society's well-being. It measures the number of deaths of children under the age of one. Research shows that infants with low birth weight or pre-term delivery have a higher risk of infant death. Several factors affect infant mortality such as socioeconomic status, lifestyle behaviours, prenatal care and access to medical care.

In 2005, the infant mortality rate in the RQHR was 6.2 per 1,000 live births. During the same period, the province had an infant mortality rate of 8.3 per 1,000 live births.

Infant mortality is a key issue for the region which offers several programs and services that directly address this area of need: Population and Public Health, Maternal and New Parents Programs, Primary Health Care Initiatives as well as community development initiatives, tobacco control and nutrition services.

SELF-REPORTED HEALTH STATUS

An individual's rating of his or her own health is a fundamental measure of health status. Studies worldwide have consistently shown that self-rated health is a strong and independent predictor of subsequent illness and premature death.

The majority of RQHR residents rate their health as either very good or excellent (57.2 per cent), according to the 2005 Canadian Community Health Survey. The proportion of adults reporting very good to excellent health was 52.35 per cent for Saskatchewan as a whole.

RISK FACTORS FOR CHRONIC DISEASES

Throughout the developed world, an increasingly aging population is placing new challenges on health systems. As well, unhealthy lifestyles such as an increasingly obese population, even among young children and teenagers, presents problems and significant issues for health care delivery.

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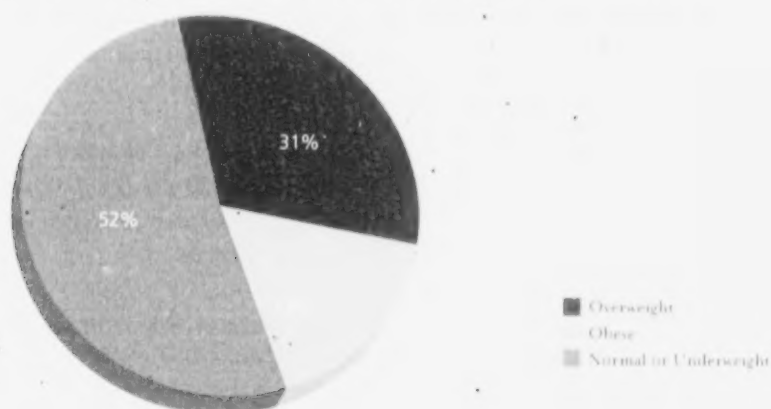
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PERCENTAGE OF POPULATION AGED 18 YEARS AND OVER WHO ARE OVERWEIGHT OR OBESITY



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In 2005, the Canadian Community Health Survey indicated that 22.9 per cent of RQHR residents aged 12 years and over were current daily or occasional smokers, a decrease from 2003 when the rate was 24.2 per cent. The RQHR continues to offer smoking cessation programs in the community for interested people.

PHYSICAL ACTIVITY

The benefits of regular physical activity cannot be overstated. Regular activity reduces the risk of heart disease, stroke, high blood pressure, diabetes, colon cancer and osteoporosis. It also helps maintain healthy body weight, decreases the risk of falls and fractures, helps prevent back pain, reduces symptoms of anxiety and depression and enhances overall quality of life.

Contrary to popular belief, the benefits of regular activity can be achieved through everyday moderate intensity activities like walking, housework and gardening along with the more traditional exercise programs. While the recommended level of activity is every day, those people who have been inactive and find it difficult to achieve this level of activity will still improve their health if they maintain some regular activity.

In their leisure time, 52 per cent of RQHR residents were either active or moderately active.

EMERGING INFECTIOUS DISEASES: TAKING ACTION

PANDEMIC INFLUENZA

The risk of a world-wide influenza has received extensive public attention over the past few years. The RQHR has developed a comprehensive plan in the event a pandemic affects the health of people in our region.

Starting in December 2003, Asia reported outbreaks of highly pathogenic avian influenza A (H5NI) among poultry with cases then cited in Europe, the Middle East and Africa. In locations where H5NI influenza has been reported, some people have become infected. As of May 16, 2007, 306 cases of laboratory-confirmed influenza A (H5NI) virus infections in humans have occurred, with 185 deaths resulting.

If the virus continues to circulate widely among poultry, it increases the chances of infecting humans and other animals: genetic mixing (reassortment) between human and avian influenza viruses could occur and create a new pandemic strain. However, to date human H5NI cases have almost exclusively been associated with direct exposure to infected birds or to surfaces contaminated with excretions from infected birds.

Key components of a pandemic preparedness plan include: disease surveillance; availability of vaccine and antivirals; coordination of health and emergency response; health system preparation; operation of essential community services; implementation of outbreak containment measures; and timely, accurate and effective public communication. Planning activities are continuing and are being refined in the areas of infection control measures and public health response measures.

WEST NILE VIRUS

West Nile virus (WNV) is transmitted by the bite of an infected mosquito. While cases of WNV have been documented in Africa, the Middle East and parts of Europe for decades, the virus first appeared in North America in 1999.

Most people infected with WNV seldom have any symptoms. About 20 per cent of people develop West Nile fever, an illness with flu-like symptoms that can range from mild to moderately severe. Less than one per cent of people infected develop a severe disease, called West Nile encephalitis or West Nile meningitis. The risk of severe disease or death is highest in elderly persons and those with underlying chronic health conditions.

In recent years, WNV has received extensive public attention and communication on the most effective methods to prevent exposure. Every year, public education programs are launched to increase residents' awareness of what they can do to reduce the likelihood of contracting this virus. Without an effective vaccine, the best way to prevent WNV disease depends on community-level mosquito control and personal protection against mosquito bites, such as repellents and avoiding outdoor exposure when mosquitoes are most active.

Population and Public Health Services monitors the mosquito population as well as the appearance of any positive human cases. Bird surveillance has been discontinued as it has been found that it does not assist in the management of the disease. Canadian Blood Services continues to test blood donations for the possibility of WNV. Case numbers have dropped sharply since the peak of 2003, with only 20 cases recorded for the whole of Saskatchewan for 2006, and only one positive case from the RQHR.

2006-2007 RESULTS AT A GLANCE

The RQHR introduced several new initiatives in 2006 - 2007 that directly responded to the health needs of its residents. These included improved access to health services, a continued focus on patient safety, partnerships with community groups to connect with hard-to-reach populations and links with staff and physicians to enhance quality of work life. Major challenges for the region continue to be a rapidly growing and aging population, an increasing young aboriginal population and the recruitment and retention of staff and physicians including necessary support staff.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

- Promote individual and community wellness through actions addressing the determinants of health and encouraging individual and social responsibility for health.
- Strengthen the RQHR as a provincial resource and referral centre through the determination of services best delivered in our region, Saskatchewan and in Western Canada.

SASKATCHEWAN HEALTH GOAL:

Improved Access to Quality Health Services

- Implemented Primary Health Care (PHC) sites in North Central Regina and "Twin Valleys" (Wolseley, Grenfell, Broadview, Whitewood, Sakimay, Cowesses, Ochapawace and Kahkewistahaw) as a key priority in 2006-2007.
- In Twin Valleys, three family physicians are now under contract with the RQHR to provide PHC services. Two of three approved Nurse Practitioner (NP) positions were filled and a significant amount of work undertaken to integrate the practices of the NPs and the physicians. Focus is to expand and enhance the collaboration and integration of a broader PHC team.
- Work continued on the North Central PHC plan: expanding and enhancing services currently provided at Four Directions Health Centre, and planning for better integration and coordination of the various RQHR PHC services located in North Central (including Four Directions, Methadone Clinic, Randall Kinship Centre and Pasqua Emergency).
- Approval received to add a second NP and clerical support to the PHC team in North Central. Recruiting for these positions is underway.
- Agreement between the College of Medicine, Academic Department of Family Medicine (ADOFM) and the RQHR is being developed to engage an ADOFM physician at Four Directions Health Centre as a dedicated member of the North Central PHC team.
- Renovations completed at Four Directions Health Centre to accommodate additional team members. However, lack of space continues to pose significant challenges.
- Agreement between the Victoria East Medical Clinic and the RQHR nearly completed. The result will be one NP, employed by the RQHR, becoming part of the practice. Recruitment for this position will occur soon.
- A funding request template was submitted to Saskatchewan Health in February 2006 for the Broad Street Medical Clinic.
- A grant agreement was developed between the RQHR and the Regina Community Clinic (RCC) to fund one NP position. The purpose is to increase the number of refugees who can access the comprehensive PHC services provided jointly by the RQHR and the RCC.
- A PHC plan was developed with the Core/Al Ritchie communities in Regina. The plan identifies many other priorities for enhancing the overall health of the community in addition to those services provided by family physicians and nurse practitioners. An implementation plan is currently being discussed.

- The RQHR re-allocated internal funding for urban and rural PHC manager positions. This was done in response to limited capacity to undertake ongoing planning efforts in the RQHR while implementing and maintaining PHC teams. A rural PHC manager has been in place since June 2006 and an urban manager will be hired early in the 2007-2008 fiscal year.
- The RQHR has enhanced its chronic disease prevention and management strategies. Recruited a person to assist with the RQHR Diabetes Plan. Two Chronic Condition Nurse Educators were recruited who will soon become part of the Twin Valleys and North Central PHC teams.
- "Live Well with Chronic Conditions," a lay volunteer-led self management program was introduced in both Regina and rural parts of the RQHR. The RQHR remains actively involved in the Health Quality Council's Chronic Disease Management Collaborative.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

- Improve the health status outcomes of aboriginal people by offering holistic service delivery, supporting traditional ways of healing, and engaging the voice of the community.
- Promote individual and community wellness through actions addressing the determinants of health and encouraging individual and social responsibility for health.
- Strengthen the RQHR as a provincial resource and referral centre through the determination of services best delivered in our region, Saskatchewan and in Western Canada.

SASKATCHEWAN HEALTH GOAL:

Effective Health Promotion and Disease Prevention

- Four Directions Community Health Centre continues to work closely with the First Nations and Métis population to deliver needs-based programming.
- Four Directions Community Health Centre has an advisory group comprised of members of the community that addresses programming. The Health Centre now produces a newsletter that is distributed to the community four times a year containing health promotion, self and family care messages as well as content on First Nations or Métis traditions and sayings from an Elder.
- Health Centre activities focus on diabetes (Cook, Eat and Live), parenting (Focus on Fathers, Reclaiming Our Lives, Creating our Teepees), women's and children's health (Healthiest Babies Possible, Mossbag classes), mental health and addictions (counsellors are now at Four Directions five days a week), and primary health care. As a result of ongoing evaluations, an "In-Motion" section has been incorporated into Cook, Eat and Live and parenting programs.
- Healthiest Babies Possible Program (HBPP) emphasizes breastfeeding with the program's breastfeeding initiation rates at 88 per cent compared to the Canada Prenatal Nutrition Program average rate of 83 per cent. The average days of breastfeeding duration for HBPP clients is 31.4 compared to the provincial average of 23.8 days.
- The North Central Community participates in an advisory group for Primary Health Care in the North Central area.
- The *Baby Friendly Initiative* continues to be a success with three client brochures developed on infant feeding and available services and supports in local communities.
- In Regina, another Breastfeeding Support Centre opened in mid-2007.
- The *Food for Life* community food store celebrated its first anniversary February 2007.
- Additional funding by the Population Health Promotion Strategy will sustain the project.
- The *In-Motion Program* continues to operate successfully.

- The *Moving Towards Health and Happiness* workshops continue to do well and to reach caregivers outside of Regina. The workshop is being developed as a one-day session and/or telehealth broadcast.
- The *Playground Leadership Program*, leadership training for students in Grades 6, 7 and 8, started in 2006-2007 as a pilot project.
- Anti-bullying and relationship abuse tool kits were developed this year for three different school-age groups.
- The *40 Developmental Assets Initiatives*, a program that focuses on building resiliency in children, youth and the community, started several projects this year.
- The RQHR continues to conduct several different initiatives in the area of tobacco control: "best practices" research on tobacco control; promotion of smoke-free workplaces; First Nations and Métis culturally-sensitive tobacco control strategies; and leadership on impact of second-hand smoke in multi-unit dwellings.
- Staff continue to enforce the *Tobacco Control Act* in public facilities.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

- Enhance the individual experience through a work environment which fosters respect, pride, accountability and "living our values."
- Enhance our performance as an academic health services organization that supports, creates and applies knowledge through research, learning partnerships and personal and professional development.

SASKATCHEWAN HEALTH GOAL:

Retain, Recruit and Train Health Providers

- The region's overall hiring rate increased 35 per cent compared to 2005-2006
- Recruited 201 Registered Nurses in 2006-2007.
- Recruited 64 new Licensed Practical Nurses (LPNs) in 2006-2007.
- Actively monitoring employee/physician turnover and forecasting vacancies to better develop strategies that effectively address the workforce issue.
- Continue to participate in job fairs, visit educational institutions, directly contact students and advertise through the website.
- Innovative recruitment methods continue to be considered: bursaries, purchased seats in training programs, new positions for graduates.
- Increased focus on improving workplace practices to enhance employee retention.
- New *Lifestyle Promotion Program* that promotes healthy lifestyle choices for employees and families.
- Implemented fourth year of five-year strategy to provide employees with aboriginal awareness training. To date, 5,575 employees trained -- 60 per cent of employee population.
- In 2006-2007, the region was actively involved in 134 studies during 2006-2007, a number that has almost doubled since 2000.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

- Provide appropriate, safe and trusted services within available resources.

SASKATCHEWAN HEALTH GOAL:

A Sustainable, Efficient, Accountable, Quality Health System.

- Authority business meetings held in public, in both Regina and rural areas of the region.
- Region's website posts meetings, agendas, minutes, addresses and phone numbers of all Authority members.
- Information on RQHR activities distributed through internal and external newsletters.
- Four Community Advisory Networks regularly provide advice and input directly to Authority.
- Residents can view key financial information about the RQHR from region's website and at any of the Health Sciences Libraries at Regina General and Pasqua hospitals and Wascana Rehabilitation Centre during regular business hours.
- RQHR has process for communicating critical incidents with all key stakeholders. In 2006-2007, 100 per cent of critical incidents met timeframe for notification.
- The RQHR approved a balanced budget for 2006-2007.
- The region concluded the year with a surplus of \$7.86 million, which is 1.25 per cent of actual operating expenditures.
- Program support expenditures account for 5.1 per cent of total operating expenditures.
- Working capital ratio is 0.44
- Expenditures for capital equipment were \$12.75 million and \$16.12 million for buildings/construction.

2006-2007 PERFORMANCE RESULTS

The RQHR has established a strong strategic framework that supports the Saskatchewan Government's *Action Plan for Saskatchewan Health Care*, to ensure the region continues to provide accessible and quality health services. The region's strategic framework and government's action plan provide the foundation for measuring progress against goals and anticipating future challenges and new directions.

In addition, the RQHR must address, on an ongoing basis, the unique needs of its different populations (aging population, young aboriginal population) and some major physician and staff recruitment issues which can present significant challenges and funding implications.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

- Promote individual and community wellness through actions addressing the determinants of health and encouraging individual and social responsibility for health
- Strengthen the RQHR as a provincial resource and referral centre through the determination of services best delivered in our region, Saskatchewan and in Western Canada.

SASKATCHEWAN HEALTH GOAL:

Improved Access to Quality Health Services

PRIMARY HEALTH CARE SERVICES

The percentage of people living in the RQHR with geographic proximity to a primary health care team is 15.9 per cent. The RQHR understands that improved health status of its residents and improved access to services require partnerships with communities and new approaches in providing care. The region has set two performance targets to help realize this goal:

1. Development and implementation of strategies to increase the percentage of Saskatchewan's population having 24/7 access to a Primary Health Care (PHC) team.
2. Integrated regionally operated health centres as part of PHC teams.

Two PHC sites were developed in the communities of North Central Regina and "Twin Valleys" (Wolseley, Grenfell, Broadview, Whitewood, Sakimay, Cowesses, Ochapawace and Kahkewistahaw) in 2006-2007. The services and programs provided at Grenfell and Whitewood Health Centres are included as part of the Twin Valleys PHC plan.

Several recruitment activities occurred in the past year to assist in the development of PHCs:

- In Twin Valleys three family physicians are now under contract with the RQHR to provide PHC services. Two of three approved Nurse Practitioner (NP) positions were filled. Purpose to expand and enhance the collaboration and integration of a broader PHC team.
- In North Central approval received to add a second NP and clerical support to the PHC team. Recruitment is currently underway.
- Agreement between the College of Medicine, Academic Department of Family Medicine (ADOFM) and the RQHR to engage an ADOFM physician at Four Directions Health Centre as dedicated member of the North Central PHC team.

- Agreement between the Victoria East Medical Clinic and the RQHR to have one NP, employed by the RQHR, becoming part of the practice.
- A grant agreement established between the RQHR and the Regina Community Clinic (RCC) for funding one NP position to enhance comprehensive PHC services provided jointly by the RQHR and the RCC to an increased number of refugees coming to Regina.

Due to the significant work involved in implementing and maintaining PHC teams while also handling ongoing planning initiatives, the RQHR identified the need for urban and rural PHC managers.

The North Central PHC plan expanded and enhanced services currently provided at Four Directions Health Centre to plan for better integration and coordination of the various RQHR PHC services located in North Central (including Four Directions, Methadone Clinic, Randall Kinship Centre and Pasqua Emergency).

A PHC plan was developed with the Core/At Risk communities in Regina. It identifies many other priorities for enhancing the overall health of the community as well as those services that are provided by family physicians and nurse practitioners.

The RQHR continues to identify opportunities for enhancing chronic disease prevention and management strategies. Recruitment has occurred to assist with the RQHR Diabetes Plan. Two Chronic Condition Nurse Educator positions were developed for the Twin Valleys and North Central PHC teams. "Live Well with Chronic Conditions," a lay volunteer-led self management program was introduced in both Regina and rural parts of the RQHR. The RQHR remains actively involved in the Health Quality Council's Chronic Disease Management Collaborative.

SURGICAL ACCESS

Ensuring timely access to surgical services is a fundamental component of the RQHR's plan to provide patient-centered care. As part of its mission of *meeting the diverse needs of its communities*, the RQHR continues to focus on providing surgical care to "urgent" patients within two to three weeks while reducing wait times for longer-waiting patients who have been assessed as "elective." In addition, pediatric patients and patients waiting for procedures related to cancer diagnoses remain top priorities for surgical access.

To achieve these goals, the RQHR is targeting the following measures of success:

1. Maintained volumes of surgeries performed throughout the fiscal year.
2. Continued reduction in the overall number of patients waiting for surgery.
3. Continued reduction in the number of "urgent" patients waiting.
4. Continued reduction in the number of patients waiting over 18 months.

Results (March 31, 2007)

In 2006-2007, the RQHR performed 20,626 surgeries, surpassing its base target of surgeries performed (20,000) by 626 cases. These volumes were primarily achieved by maintaining expanded operating room levels at Regina General Hospital and Pasqua Hospital.

The continued emphasis on addressing the needs of surgical patients throughout the year resulted in a reduction of the number of patients waiting from 9,815 (as of March 31, 2006) to 8,831 (as of March 31, 2007), a total of 984 patients.

The percentage of priority surgical cases performed within Saskatchewan's target time frames in the last fiscal year were: 43 per cent (level I), 31 per cent (level II), 42 per cent (level III), and 72 per cent (level IV).

To further improve access in the RQHR a range of several interrelated initiatives will be required. Recruitment and retention of nursing staff and anesthetists will continue to be a priority. In addition, the need for ongoing process review and the pursuit of efficiency within the system in such areas as Specialty Care Services will be required. Such initiatives will be essential in supporting the planned surgical capacity increases for 2007-2008.

Surgical care initiatives include:

1. Implementation of a Musculoskeletal Clinic pilot program.
2. Implementation of a Surgical Bariatric Clinic pilot program.
3. Implementation of Provincially developed surgical pathways.
 - a. Total Hip Replacement
 - b. Total Knee Replacement
 - c. Spine Surgery
4. Review and redesign of OR scheduling processes including the management of recommended changes.
5. Participation in the Provincial Surgical Information System implementation planning.
6. Implementation Planning for the development of the Ambulatory Surgical Centre.
7. Reviewing and developing alternate models of care for the surgical patient.

The RQHR will develop consistent mechanisms to track and report progress and effectiveness of these initiatives as they are implemented throughout the fiscal year.

DIAGNOSTIC IMAGING

The Interventional Radiology Suite, installed last year, conducted 1,191 more diagnostic examinations (48 per cent) in 2006-2007 compared to 2005-2006. As a result, many patients were able to avoid surgery.

The number of exams conducted continues to increase, resulting in decreased wait times for clients to receive CT and MRI scans.

This past year the RQHR received additional funding to conduct more exams: 13,786 more CTs on 1,132 more patients than in the previous fiscal year, achieving 126 per cent of the new target volumes, and for MRIs, 687 more examinations on 932 more patients than in the previous fiscal year achieving 86 per cent of the new target volumes. The waitlist for most MRI examinations has decreased from well over a year to about three months.

The RQHR's new 64-slice CT has been used in a variety of clinical applications to detect anomalies, including diagnosis of complex cardiac cases. The technology allows diagnosis without the use of invasive clinical techniques thus improving the patient experience and often avoiding time in hospital.

The Diagnostic Imaging Team has achieved national and international recognition for its use of the 64-slice CT and has been asked to demonstrate the 64-slice CT unit as well as deliver lectures outside of the province about the technology.

Use of the ultrasound technology has met with some obstacles due to the lack of sonographers available in the province. In 2006-2007, 3,245 fewer ultrasound exams were performed on 1,427 fewer patients than in the previous fiscal year and the RQHR waitlist, especially for vascular procedures, has increased. Recent recruitment efforts show promise and by early 2008 the RQHR hopes to be fully staffed so that the ultrasound waiting list can be reduced.

ACUTE CARE ACCESS PLAN

Over the past year, physicians and staff throughout the organization have worked hard in nine key areas to improve access to acute care services.

The region has managed to:

- Enhance bed capacity
- Improve surgical access.
- Improve emergency effectiveness.
- Support enhanced physician practice.
- Increase alternate level of care and community alternatives to acute care.
- Improve discharge planning.
- Improve diagnostic access and effectiveness.
- Improve effectiveness of transfer of patients between health regions.
- Enhance utilization information capacity.

Alternate Level of Care

In early 2006, the Pasqua Hospital opened a 20-bed Alternate Level of Care (ALC) unit. ALC refers to patient beds not located in acute care hospitals, but in long-term care facilities that can still offer a level of care for people with various conditions and disorders. Patients in the ALC unit must be approved for placement and not require the services of an acute care setting. By making this change, the RQHR further ensures that acute care beds are available for those people most in need while still meeting the needs of all patients.

To date, 319 patients have been admitted to the ALC unit.

As a result of \$1.7 million in funding from Saskatchewan Health, the RQHR initiated a 12-month pilot at the Regina General Hospital emergency department to streamline patients based on level of acuity. A similar project is planned for the Pasqua Hospital emergency department in early 2008 once renovations are completed to accommodate the new process. The overall goal is to improve access for people using emergency services at both hospitals.

Physician Inpatient Services

To improve physicians' ability to deliver quality care and utilize resources effectively in Regina's acute care facilities, three new initiatives were introduced:

- A Physician Accountability Working Group analyzed data/information, physician performance measures, physician leadership structures and physician leadership training.
- Work continues on the development and implementation of clinical practice guidelines.
- A project plan is being developed to implement a Hospitalist program later in 2007.

Full Capacity Protocol

When the demand for acute care admission exceeds the acute care bed capacity, a system-wide response, the full-capacity protocol, is established. In addition to a number of system response actions, 15 beds at the Regina General Hospital and seven beds at the Pasqua Hospital are allocated for Full Capacity Protocol. Early results show less time in a system-wide overcapacity state. As well, an automated Patient Information Flow Sheet was developed to track real time capacity information and to help eliminate barriers to timely care.

Patient Flow Coordination and Discharge Planning

Following a rigorous quality improvement process, staff and physicians identified opportunities to improve patient flow through the hospital system. These ideas were pilot tested in one of the medicine units. The project improved the flow of patients by better coordinating their care in hospital and assigning target discharge dates for patients. The team wanted to bring the average length of hospital for RQHR patients closer to the national benchmark expected length of stay. The team met its goal and reduced the gap by 47 per cent. In addition, patients and clinicians reported better communication. Based on the project's success, it has now been introduced to three other medicine units with plans to expand it to other units over the next year.

Acute Care Access Line

The RQBedline assists physicians 24 hours, seven days a week, for trauma, critical care and acutely ill patients by contacting on-call specialists, accessing an appropriate hospital bed and arranging transportation as needed. A pilot project was initiated in Sunrise Health Region on February 1. Referring physicians are satisfied with the service that the RQBedline provides.

MultiRegion Patient Flow Project

RQHR, in partnership with Cypress, Five Hills, Sun Country and Sunrise Health Regions, along with Saskatchewan Health and the Health Quality Council, initiated a major quality improvement project to improve patient flow between the regions. After reviewing current procedures and leading practices, the project team redesigned the patient transfer process and piloted it in the Sunrise Health Region for eight weeks. The pilot project proved successful: Percentage of patients who accessed RQHR tertiary care through RQBedline went from about eight per cent to more than 80 per cent during the pilot. The average time for a Sunrise physician to call the RQBedline and connect with an RQHR physician was 14 minutes, significantly better than the 30 minute goal established for the pilot project.

Clinical Practice Guidelines

Work continues on the development and implementation of clinical practice guidelines. A process to identify and prioritize medical conditions that would benefit from adopting current best practice and incorporating these guidelines into preprinted physician orders occurred in the past year. As well, a region-wide policy for physician orders was developed and approved. Procedures for the development and implementation of preprinted physician orders will be completed next year.

PATIENT SAFETY TASK FORCE

The Patient Safety Task Force, led by President and CEO Dwight Nelson, continued its work to advance the patient safety agenda in the RQHR. A multi-disciplinary team of care providers including physicians, Regional Health Authority (Board of Directors) members, and public and patient representatives developed a patient safety commitment statement for the organization. After a review by staff and public focus groups, and approval by the RQHR Board of Directors, the patient safety commitment statement will be implemented in the RQHR later this year. The statement will assist the RQHR in its patient safety plans and initiatives.

The task force identified visible leadership and sense of urgency as necessary organizational attributes and conditions that must be embedded in the region's culture to ensure patient safety. The task force has sponsored an RQHR staff culture sensitivity survey to gauge staff and physician opinion of these patient safety-related workplace attributes. The survey will be conducted in mid-2007.

The Patient Safety Task Force has started identifying system-wide patient safety indicators and measures that will be reported as part of the organization's corporate balanced scorecard. Monitoring these whole-system measures will further enable the RQHR to fulfill its oversight responsibilities to ensure safe and quality care for all patients.

The Patient Safety Task Force's work will continue to further advance the patient safety agenda in the RQHR.

SAFER HEALTHCARE NOW! CAMPAIGN

In 2006-2007, the (RQHR) joined the *Safer Healthcare Now!* Campaign. This Canada-wide campaign targets six specific initiatives designed to improve health care delivery by focusing on patients and their safety while in the care of the health system.

The RQHR has begun work on two of the campaign's initiatives. The first initiative is called Medication Reconciliation and involves developing and implementing a systematic process to reconcile patient home medication use with medications prescribed in hospital. The goal is to reduce the number of adverse drug events related to discrepancies between home medications and those ordered upon admission to hospital. The second initiative, called Surgical Site Infections, implements clinical best practice standards in relation to preventing post-operative infections. The goal is to reduce patient injury and death related to preventable surgical site infections.

Teams consisting of senior leaders, physicians, managers and front line staff, supported by the Quality Improvement Department, will implement these two initiatives using *Safer Healthcare Now!* Campaign materials, tools and methodologies. The two teams will report outcomes on both initiatives in 2007.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

- Improve the health status outcomes of aboriginal people by offering holistic service delivery, supporting traditional ways of healing, and engaging the voice of the community.
- Promote individual and community wellness through actions addressing the determinants of health and encouraging individual and social responsibility for health.
- Strengthen the RQHR as a provincial resource and referral centre through the determination of services best delivered in our region, Saskatchewan and in Western Canada.

SASKATCHEWAN HEALTH GOAL:

Effective Health Promotion and Disease Prevention

The emphasis on healthy communities and healthy people in the vision statements of both Saskatchewan Health and of the RQHR supports the importance of effective health promotion and disease prevention. In addition, one of the key areas of primary health care is to provide services in the community where people live and work, focusing on health promotion and disease prevention. As outlined in the previous section (Improved Access to Quality Health Services), the RQHR has several initiatives in place or planned that address the need for integrated community-based health service delivery.

Creating supportive environments where people will find it easier to take positive action for their health is essential for disease prevention. To reach this goal, activities must be in place that address the following key strategies:

- Improvement of health status through supporting individuals and communities in taking responsibility for their own health through service redesign.
- Improve the health status and outcomes of aboriginal people by offering holistic service delivery, supporting traditional ways of healing and engaging the voice of the community.

Partnerships, both within the RQHR as well as the community, are key in developing programs that effectively address health promotion and disease prevention. During the past year, the RQHR developed several initiatives as a result of such partnerships. Some examples are:

FIRST NATIONS AND MÉTIS HEALTH INITIATIVES

The RQHR worked closely with many organizations and individuals from the First Nations and Métis communities to further improve service delivery. Activities focused on those high-need areas such as diabetes, women's and children's health, mental health and addictions, home care and primary health care.

The region also developed a series of cultural awareness initiatives to increase employees' understanding of potential barriers to good health for First Nations and Métis communities. This included training sessions for both staff and board members, ongoing information to employees through different communication channels, and scheduled events with First Nations and Métis people to increase understanding and collaboration on areas of interest in the health field.

As well, several initiatives were planned to improve coordination of services and develop a more collaborative, trusting relationship with First Nations and Métis communities. Opportunities were identified to meet and discuss areas of concern in health service delivery and identify solutions. First Nations and Métis groups were consulted on development of services that directly addressed needs in their communities.

POPULATION AND PUBLIC HEALTH SERVICES

Population and Public Health Services has accountability for leading health promotion initiatives. In 2004 Saskatchewan Health released the document *"Healthier Places to Live, Work and Play. A Population Health Promotion Strategy for Saskatchewan."* One of the outcomes from the report is the requirement that the RQHR submit an annual population health promotion strategy, increasing the focus on health promotion within the region and the involvement of more departments. For example, Mental Health and Addictions Services and Population and Public Health Services now collaborate more often on different initiatives. This reflects the interrelationship of the four primary areas of action: mental well-being, decreased substance use and abuse, active communities and accessible, nutritious foods.

In the past year, several partnerships were formed with the RQHR and with community partners. Some examples include:

The Baby Friendly™ Initiative

This program improves breastfeeding initiation and duration rates, resulting in healthier outcomes for infants.

A committee with members from RQHR departments and communities continues to focus on activities that help meet the standards reflected in the Breastfeeding and Baby Friendly Initiative policy for the region. The policy is the first of its kind in Saskatchewan and is considered a model for other health regions.

RQHR provided input into the development of three client brochures on infant feeding and a listing of available services and supports in local communities. Within Regina, another Breastfeeding Support Center opened in mid-2007, offering an alternate time and location for breastfeeding clients.

Food for Life – A Food Security Project

Food security exists when all people at all times have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preference for an active and healthy life.

The community food store, *Food for Life*, operates one day per week in the Core/Al Ritchie neighborhood. In February 2007 *Food for Life* celebrated its first anniversary. The store was the result of a community-driven partnership addressing the need for accessible, affordable nutrition in the neighborhood when supermarkets moved to the outskirts of Regina. Additional funding by the Population Health Promotion Strategy will help sustain the project which provides residents with fresh fruits and vegetables, meats, dairy products and whole grain items at affordable prices every Monday afternoon.

Partnerships with In-Motion and other physical activity programs

The promotion of physically active communities has been strengthened by working with Saskatchewan and Regina In-Motion programs.

The *Moving Towards Health and Happiness* workshops continue to be well received. These workshops help in building supportive pre-school environments by providing caregivers with skills and resources to incorporate daily physical activity into day care centres and pre-school programs. To reach caregivers outside of Regina, the workshop is being developed as a one-day session and/or telehealth broadcast.

The Playground Leadership Program started in 2006-2007 as a pilot project initiated by a partnership of the South East Saskatchewan Association for Culture, Recreation and Sport, Prairie Valley School Division and an RQHR Health Promotion coordinator provide leadership training to students in Grades 6, 7 and 8.

Anti-Bullying and Relationship Abuse Tool Kits

Innovative and interactive tool kits for three different age groups were completed this year and available for loan to schools and other children's organizations. The kits include videos, books, games and many other creative activities that engage young people and help them learn about anti-bullying and relationship abuse.

40 Developmental Assets Initiatives

Building resiliency in youth is the goal of a new initiative sponsored by the RQHR along with the *Regina Alliance of Asset Champions*, a coalition of different sectors, agencies and individuals. The alliance supports the *40 Developmental Assets*, a concept developed by the *Search Institute* in Minneapolis that focuses on building strength in children, youth and the community.

Four community-based organizations (two rural and two urban) received funding for asset-specific pilot projects this year. The projects focus on middle-school children (ages 9 to 12). In the spring, the RQHR hosted an information booth at the Home and Garden show in Regina, and in the fall every elementary school in the RQHR will receive an Assets Information Kit.

As well, the RQHR is producing television, radio and print public service announcements that raise awareness of the assets and the role every citizen plays. In fall 2007 RQHR hosts a Generations Together workshop, bringing together 75 people who represent five generations of the community to spread the assets message.

Tobacco Control

RQHR Health Promotion and Environmental Health departments are funding research to identify the next "best practices" tobacco control strategy. Work continues on the promotion of provincial legislation to support smoke-free workplaces. The RQHR Tobacco Reduction Committee is assisting First Nations and Métis communities to implement effective and culturally sensitive tobacco reduction strategies. Partnerships are being developed to deal with contraband -- illegally obtained tobacco. The RQHR has taken a leadership role in the impact of second-hand smoke in multi-unit dwellings and in responding to Health Canada's consultation on federal regulations to ban power wall displays and cigarette packages visible behind cash registers.

As part of the *Tobacco Control Act*, enforcement staff visited facilities throughout the RQHR, particularly billiard halls, bingo establishments, bowling centres, casinos, restaurants and taverns. When public health inspectors conduct routine facility inspections or investigate complaints (not related to tobacco) in a public place, they ensure that the owners/operators/managers are complying with the *Tobacco Control Act*. If a facility is not in compliance, the public health inspector follows up until compliance is achieved.

More than 99.5 per cent of public eating establishments, billiard halls, bingo establishments, bowling centres, casinos and taverns are complying with the Act.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

- Enhance the individual experience through a work environment which fosters respect, pride, accountability and "living our values."
- Enhance our performance as an academic health services organization that supports, creates and applies knowledge through research, learning partnerships and personal and professional development.

SASKATCHEWAN HEALTH GOAL:

Retain, Recruit and Train Health Providers

People are our passion. By putting people first we are able to achieve our mission and fulfill our vision through a service environment built on mutual respect, collaboration and teamwork.

Recruiting and retaining a sufficient supply and appropriate mix of health care professionals is vital to ensuring a sustainable quality service. With changing demographics and growing competition for talent in a competitive labour market, rigorous efforts are required to attract and retain skilled health care professionals.

By actively monitoring employee/physician turnover and forecasting vacancies, the RQHR can proactively develop strategies that most effectively address the workforce issue. Shortages have been identified in certain professional groups, including Registered Nurse/Registered Psychiatric Nurse (RN/RPN), Licensed Practical Nurse (LPN), Medical Laboratory Technologist, Medical Laboratory Assistant, Pharmacist, Respiratory Therapist, Sonographer, Biomedical Engineering Technologist, Physiotherapist, Orthotist and PHD Psychologist.

Potential interested employees receive information on different RQHR employment opportunities through career fairs, visits to educational institutions/classrooms (in and out-of-province), direct student contact/mailings, direct referrals and web-based advertising.

The RQHR has participated in many recruitment events and career fairs in Alberta, Saskatchewan, Manitoba, and Ontario. In the past year, efforts to attract Alberta applicants have proven more effective than in previous years. The region's aggressive marketing tactics generated more inquiries, applications and successful hires of nursing professionals from Alberta. The successful recruitment results are likely due to the high cost of living in Alberta, coupled with the availability of financial incentives to move to Saskatchewan.

While ongoing recruitment challenges continue, a lot was achieved this fiscal year. The region's hiring rate increased 35 per cent compared to last year. Of the 968 new hires, 201 were Registered Nurses and 64 were Licensed Practical Nurses.

RQHR continues to attract foreign applicants through various online marketing tools. Further enhancements to foreign marketing efforts will be pursued in 2007.

Bursaries, purchased seats in training programs (in and out-of-province) and creating positions for new health professionals graduating from local institutions have all proven to be successful recruitment strategies.

RETENTION

The RQHR's future success depends significantly upon the skills, energy and commitment of its employees. As the demand for health care professionals intensifies, understanding what motivates and inspires the loyalty of today's workforce is crucial.

The quality of the work environment directly impacts the region's ability to recruit and retain the necessary employees. Improving workplace practices based on factors that enhance employee engagement is one of the key priorities.

LIFESTYLE PROMOTION PROGRAM

The RQHR launched a new Employee Lifestyle Promotion Program in May 2006. The program promotes healthy lifestyle choices for employees and their families (e.g., smoking cessation, healthy eating, increased physical activity). The expected program outcome is that employees will maintain positive active lifestyles, creating a healthier workforce and community. The results and success of the program will be measured in improved attendance, reduced injury rate and an increase in the positive ratings in the employee survey.

REPRESENTATIVE WORKFORCE PROGRAM

The RQHR supports a Representative Workforce: All members of society have fair and equal access to employment opportunities and the workforce reflects the diversity of the working population in the community.

The Representative Workforce Strategy is intended to facilitate employment opportunities for groups designated by *Saskatchewan Human Rights* as under-represented in the Saskatchewan workforce, including persons of aboriginal ancestry, people with disabilities, visible minorities and women.

In June 2006, on National Aboriginal Day, the RQHR, affiliates and unions signed a new Aboriginal Employment Development partnership agreement with Saskatchewan First Nations and Métis Relations to create more employment opportunities for First Nations and Métis people.

Through strategic partnerships and promoting employment opportunities, the composition of the RQHR's current workforce continues to change. In the pursuit of a representative workforce, strategic partnerships exist with government, unions, educational institutions and community groups.

HIRING OF INDIVIDUALS FROM DESIGNATED GROUPS

Currently the workforce demographics, including affiliated employees is composed of:

- Five per cent aboriginal compared to 13 per cent of the provincial population and 8.7 per cent of the Regina population.
- Seven per cent visible minority compared to 5.6 per cent of the provincial population.
- Three per cent disabled compared 9.7 per cent of the provincial population.

ABORIGINAL AWARENESS TRAINING

Awareness training fosters a positive and supportive climate, while integrating aboriginal people into the workforce. The RQHR's strategy to provide all employees with aboriginal awareness training means 57 per cent of the employee population has received the training. Aboriginal awareness training is provided to new employees during their orientation.

INVESTING IN SAFETY

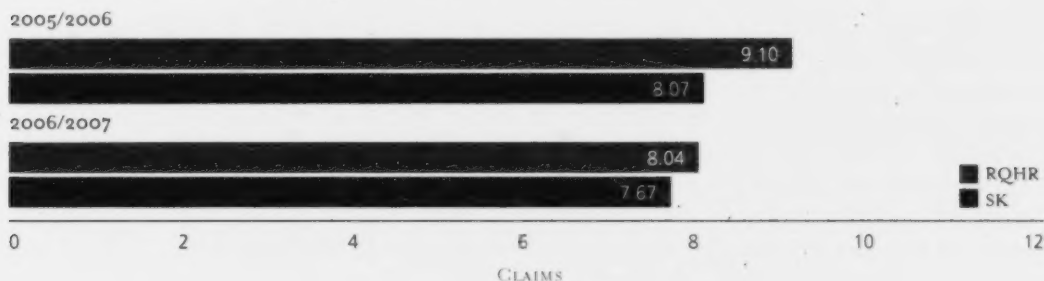
In January 2006 the Saskatchewan Workers' Compensation Board recognized the RQHR for its efforts in creating a safe and healthy workplace by presenting a Certificate of Achievement to the region.

Recognizing the many efforts that contributed to the achievement of the award, the RQHR, in partnership with the Occupational Health & Safety committees, requested proposals from employees for funding to enhance workplace safety. Many innovative and creative proposals were received with funding designated for 14 proposals. Some were fully funded; others, such as ceiling mounted track lifts, received partial funding.

Following are the proposals that received full or partial funding:

1. Home Care, Palliative Care, SWADD: Implemented The Community Safety Program for 450 employees. Security measures to control and manage risk associated with working in communities within the health region including a process for severe weather conditions, a check in/check out plan, a safe visit plan, challenging cases protocol, etc.
2. Population and Public Health: Ergonomic Computer Station
3. Population and Public Health: Carts to transport material
4. Nutrition and Food Services: Pallet lifters for loading groceries
5. Nutrition and Food Services: Table mover to provide a safe manner in which to move tables for various RQHR functions
6. Nutrition and Food Services: Light-weight tables for catering functions
7. Unit 4C, Pasqua Hospital: Commenced Program on Transfer, Lifts and Repositioning (TLR)
8. Therapies, RGH: Special walker to mobilize Bariatric patients sooner.
9. St. Joseph's Hospital: Harassment/Violence workshop
10. Balcarres Integrated Facility: Commenced Program on Transfer, Lifts and Repositioning (TLR)
11. Adult Therapy Program, WRC: Hydraulic jack to lift wheelchairs, elevating them to working height while being repaired
12. Surgical ICU (Intensive Care Unit): Ceiling Track Lifts for moving patients
13. Medical Pediatric ICU: Ceiling Track Lifts for moving patients
14. Pasqua Hospital ICU: Ceiling Track Lifts for moving patients

NUMBER OF LOST-TIME WCB CLAIMS PER 100 FTEs



The number of lost-time Workers' Compensation Board (WCB) claims per full time equivalent (data source: Saskatchewan WCB) compared to the provincial number.

The RQHR lost-time claims per 100 full time equivalent (FTEs) reduced slightly when compared year to year. The number of claims overall for the region are higher than the provincial benchmarks in both 2005-2006 and 2006-2007. The variance between the region and the provincial benchmark is reduced when compared year to year.

The most frequent type of injuries in the work place continue to be from lifting, transferring and repositioning actions. In response, the RQHR created an education consultant position to focus on developing a culture of safety with the goal of eliminating all musculoskeletal injuries. A statistical report for each department and service area detailing the number of lost-time claims per 100 FTEs is now in place. The purpose of the information is to target reduction strategies for those areas that have higher injury rates.

QUALITY WORK ENVIRONMENT

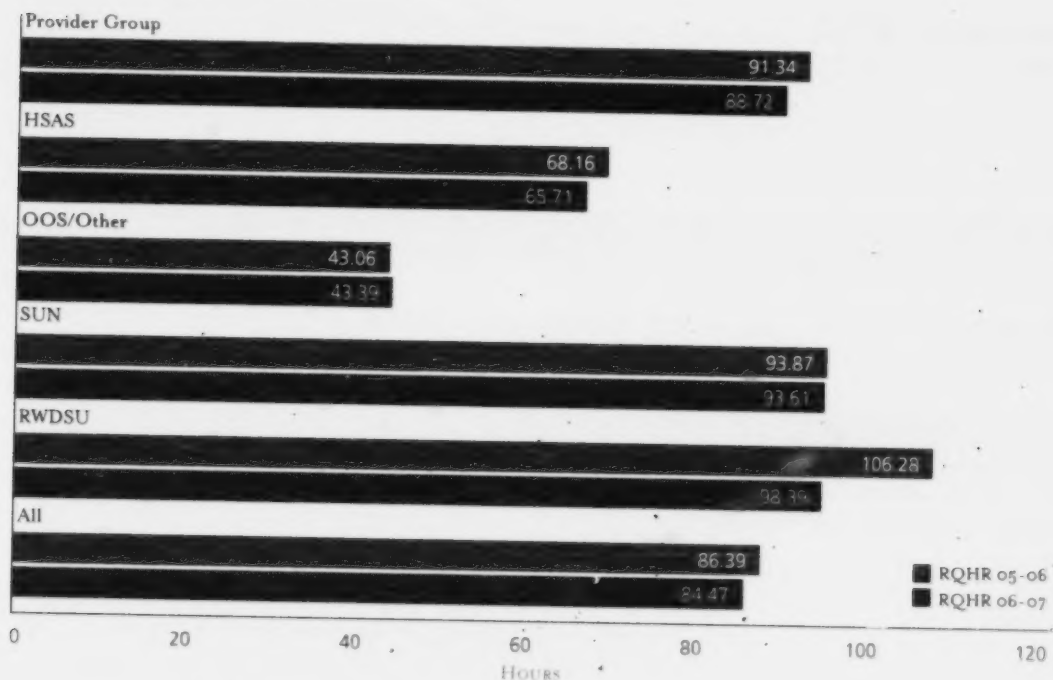
The RQHR has several initiatives in place that enhance the health, safety and quality of the work environment for employees. Influenza vaccinations continue to be offered to people working in the health region. Along with good infection control techniques, the vaccination further protects the safety of employees, patients, clients and residents. Public education initiatives continue every year during influenza season to increase the rate of employee participation.

The Attendance Support Program in support of the "People Philosophy" enables employees to be at work, stay at work or return to work on a timely basis consistent with the person's abilities and restrictions. The Conflict to Collaboration Program, a partnership with Saskatchewan Justice, Dispute Resolution Office, provides employees with the tools to effectively resolve conflict in the workplace.

The RQHR Fit Club provides employees with an opportunity to exercise and maintain physical fitness through various fitness programs offered within the region. From "total body workout" classes to "stretch and relax" classes, there is something for everyone. The Employee Fitness Center located at WRC offers an array of fitness equipment for cardio and strength training. The development of a fitness centre at the RGH is targeted to open in June 2007. This year RQHR purchased fitness equipment for three rural facilities including Fort Qu'Appelle Community Services, Grenfell Health Centre and Long Lake Valley Integrated Facility.

Other ongoing initiatives of the RQHR include: Respiratory and Personal Protection Program, Infection Control and Outbreak Planning, Back Management Program, Employee and Family Assistance Program, and Personal and Professional Development.

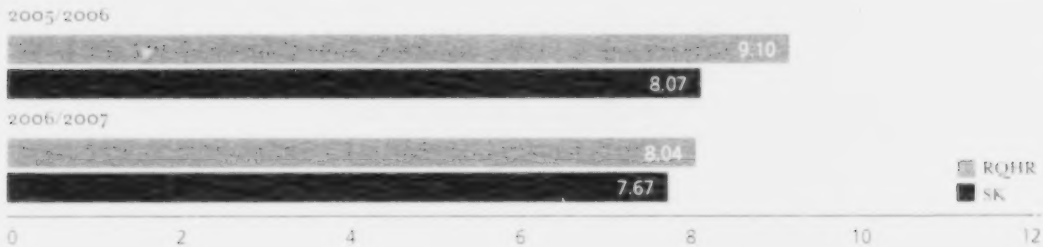
NUMBER OF SICK LEAVE HOURS PER FTE



The total number of hours employees absent from work due to illness or injury per full time equivalent by affiliation.

Overall the RQHR had a slight reduction in sick leave hours per FTE. As well, there was a decrease in sick leave hours for four groups including the provider group, HSAS, RWDSU and All. For employees affiliated with OOS/Other, there was a slight increase.

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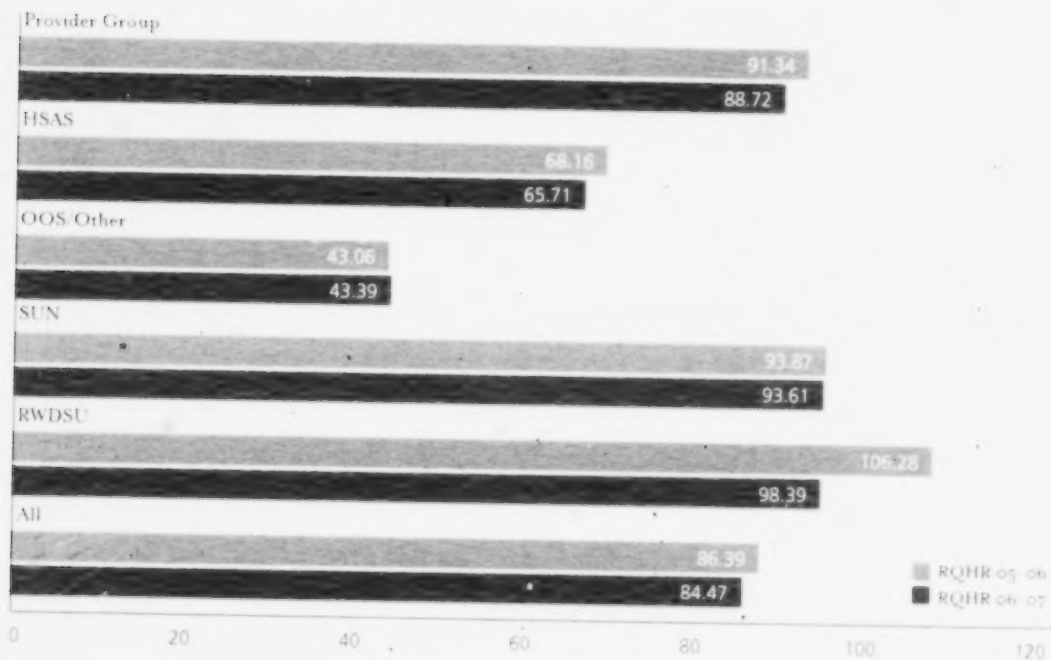
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2006-2007 PERFORMANCE RESULTS

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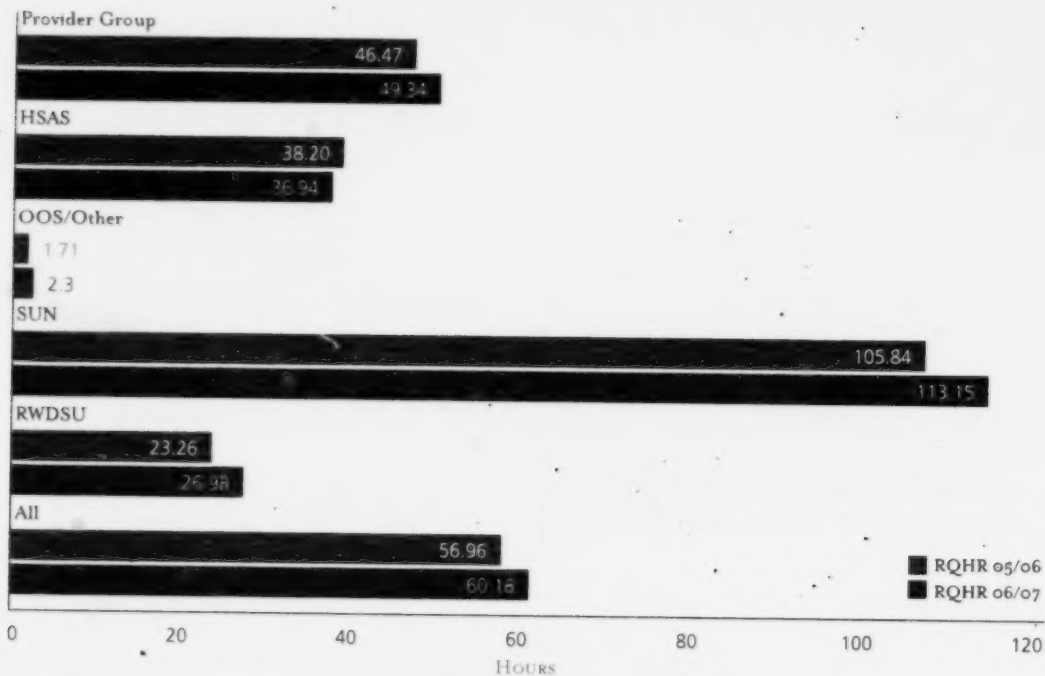
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NUMBER OF OVER-TIME & OTHER PREMIUM HOURS PER FTE

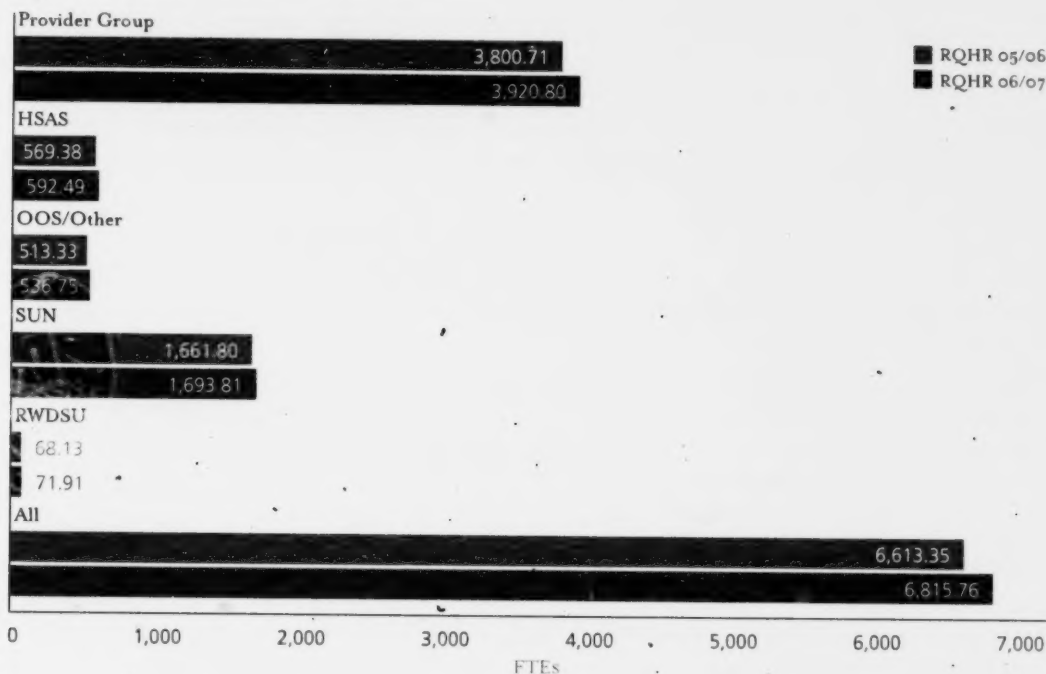


The hours per FTE that a premium (overtime and other) was paid by affiliation.

The highest premium rates occurred among SUN employees, (Registered Nurses) with rates increasing for all groups except HSAS.

In 2005-2006, the region implemented electronic scheduling software to standardize scheduling practices. Recruitment strategies continued to focus on areas of high overtime usage and hard-to-recruit classifications along with relief positions to cover multi-sites.

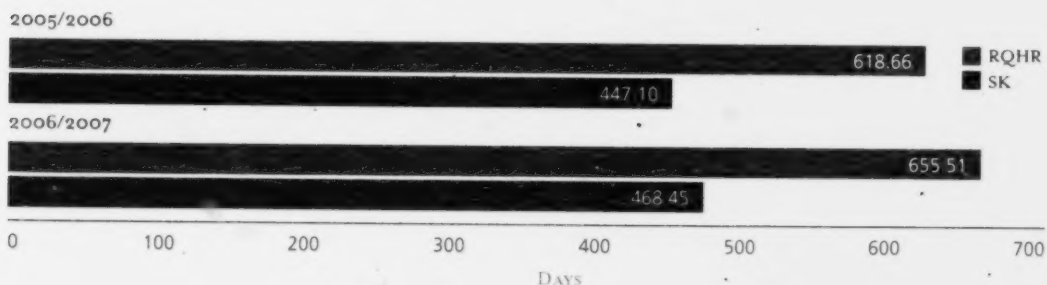
DISTRIBUTION OF FTEs BY AFFILIATION



The total number of FTEs in the region.

The number of FTEs remains relatively stable for all affiliations in comparison to the previous year.

NUMBER OF LOST-TIME WCB DAYS PER 100 FTEs



The number of lost-time WCB days per FTE (data source: Saskatchewan WCB) compared to the provincial number.

The RQHR had a significant increase in the number of lost-time days per 100 FTEs in the year to year comparison. The number of lost-time days was higher than the provincial benchmarks in both 2005-2006 and 2006-2007.

2006-2007 PERFORMANCE RESULTS

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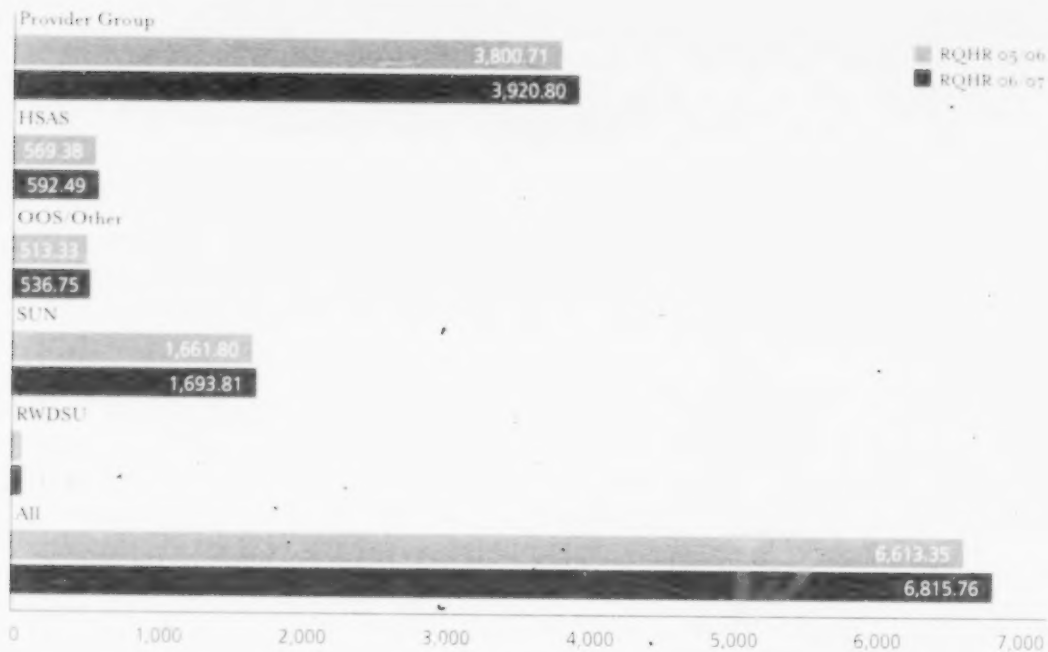
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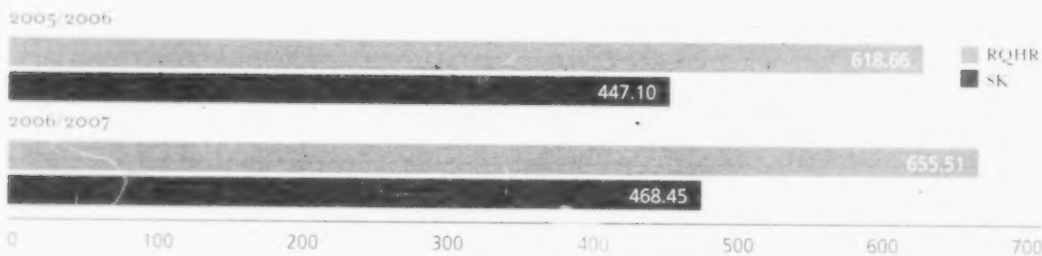
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KEY ACCOMPLISHMENTS:

- Signing of an Aboriginal Employment Development Partnership Agreement
- Increased the regional hiring rate by 35 per cent compared to last year
- The transition to Safety Engineered Sharps Devices resulted in a 22 per cent reduction in the number of contaminated punctures
- Training of 4,000 employees on personal protective equipment and proper fit testing for respiratory protective devices

KEY INITIATIVES:

- Employee engagement activities
- Advancement of Graduating Professionals Employment Opportunities
- Full Scope of Practice expanding RN and LPN clinical practice and maximizing nursing scope within each discipline
- Vacancy Management/Succession Planning/Career Pathing
- Performance Management
- Business processes continue to be reviewed for effectiveness and efficiency
- Launch of the *Living Our Values Program*

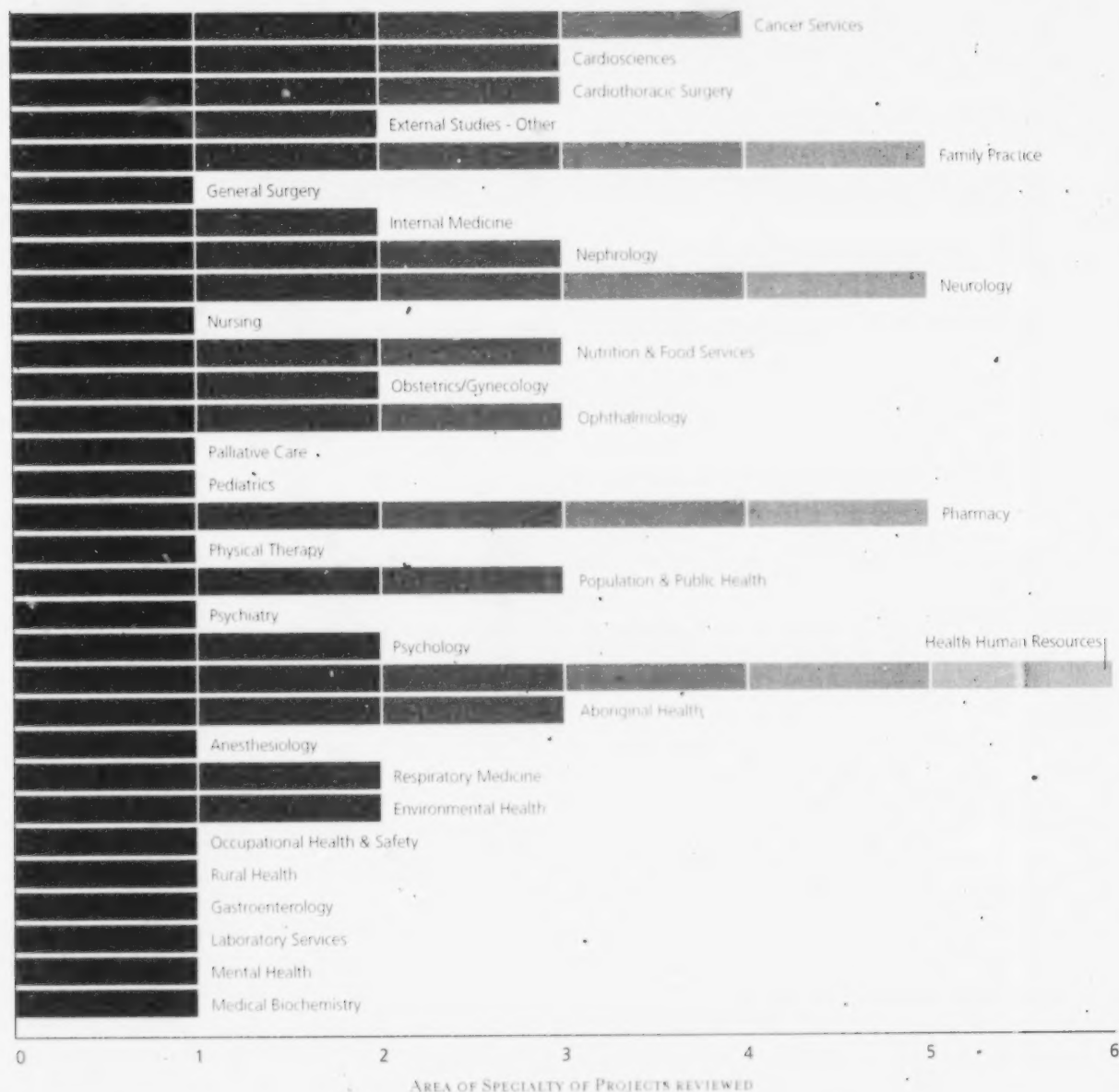
RESEARCH

Health research tests the effectiveness of new treatments, informs health systems about factors that increase the probability of illness, and supports the development of the most effective means of delivering health care.

The RQHR is dedicated to supporting health research. In the past year, 71 new studies representing more than 21 areas of medical specialty were approved by the RQHR's Research Ethics Board.

The areas of cardioscience, obstetrics/gynecology, neurology, nutrition & food services, and psychology were most active with each area initiating six new studies.

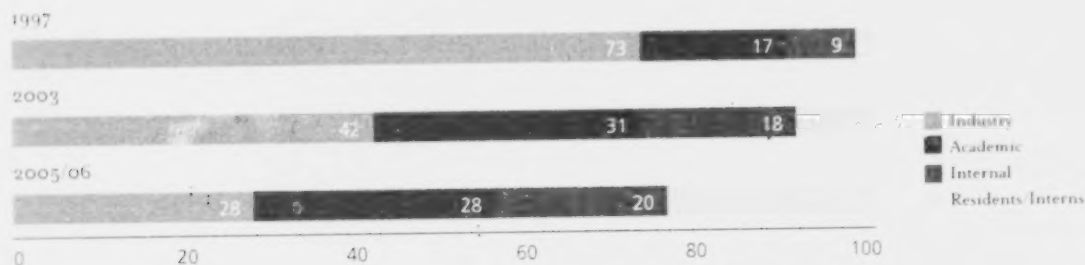
RESEARCH PROJECTS BY AREA OF SPECIALTY



Since many studies require more than one year to complete, the region was actively involved in 130 studies during 2006-2007, a number that has almost doubled since 2000.

THE CHANGING FACE OF RESEARCH II

In 1997, most of the research being conducted in the RQHR was industry-sponsored clinical drug trials (73 per cent), and only one-quarter (27 per cent) was led by a researcher from an academic institution (e.g., University, SIAST), or an internal staff member, resident or intern. Over the last decade, however, research has evolved to include a balance of industry, academic, internal and resident research.



The RQHR works in partnership with the Universities of Regina and Saskatchewan, Health Quality Council, and other organizations, companies, and researchers to conduct these studies.

REGINA QU'APPELLE HEALTH REGION STRATEGIC THEMES:

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SASKATCHEWAN HEALTH GOAL:

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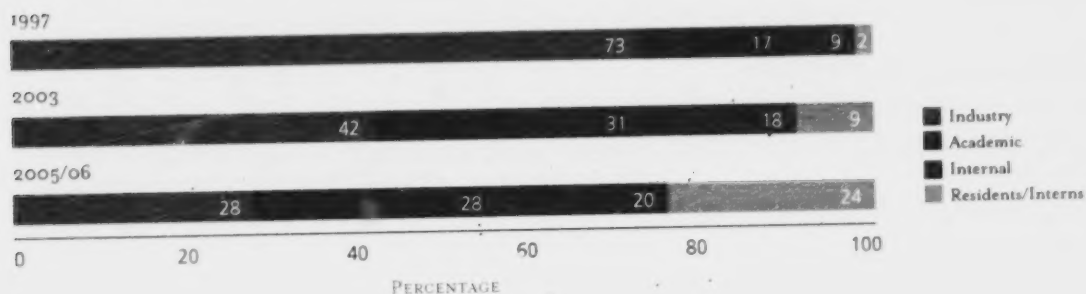
PUBLIC TRANSPARENCY

The RQHR recognizes that the foundation of an effective and responsive health system is communications with the public, its staff and physicians that promote a model of transparency and trustworthiness. The region has taken several steps to ensure such a value is embraced throughout its organization and conveyed in all actions. Several initiatives are in place that support this direction:

- Authority business meetings are held in public, and convened both in Regina and in rural areas of the region. The region's website includes notices of meetings, agendas, minutes, addresses and phone numbers of all Authority members. Media are invited to meetings advertised in the *Leader-Post* and community newspapers, and media advisories are sent to all regional media informing them of Authority meetings.
- Information on RQHR activities are regularly distributed through the region's internal and external newsletters.
- Three Community Advisory Networks representing communities in the region regularly provide advice and input directly to the Authority.
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- Several different communication initiatives are in place to reach residents and other people who use RQHR services. The region's website (www.rqhealth.ca) provides valuable information on programs and services, current news items and general health information. *HealthNews*, the region's quarterly publication, is delivered to all homes in the region and it contains a message from the Authority Chairperson, advice on healthy living and information on programs and services offered by the RQHR.
- Media are a vital communication link with residents in the region and the RQHR has almost daily contact with reporters and works to maintain a positive and respectful working relationship with news organizations. In all its interactions with media, the region ensures that the privacy rights of patients, clients, residents and visitors are preserved.
- The region understands that effective and consistent communication with its 7,500 employees and more than 500 physicians, people who are providing frontline services and directly interacting with patients, is fundamental if patients and the public are to gain a clear understanding and trust of the region. To ensure timely communication, the region produces a weekly electronic newsletter, *e-link*, for staff and a monthly publication for physicians, *The Physician*.

REPUTATION MANAGEMENT

In striving to be a transparent and trustworthy organization, the RQHR has developed a reputation management process that is sponsored by the President and CEO, has evolved under the direction of the Senior Management Team, and is supported by the Public Affairs Department. A strong reputation is a product of both good performance and good communication and the RQHR is committed to enhancing its reputation over time. In 2007-2008, the region's Senior Management Team will further develop the reputation management process with the goal of meeting public and key stakeholder expectations.

CRITICAL INCIDENTS

The RQHR has a defined process for communicating critical incidents with all key stakeholders involved, including patients and family members. A critical incident is defined as a *serious adverse health event including, but not limited to, the actual or potential loss of life, limb or function related to a health care service provided by, or being provided by, a regional health authority or health care organization.*

In the RQHR, all critical incidents are immediately addressed using a root cause analysis, a tool designed to help identify *what* and *how* an event occurred, and more importantly *why* it happened. The root cause analysis is often facilitated through a team case review involving the health care team. The purpose is not to lay blame, rather to identify the cause of the incident and take actions to avoid a similar incident in the future. The review focuses on identifying the root cause of the critical incident and then developing effective quality improvement strategies to prevent recurrence.

Through staff education the region continues to place more emphasis on internal reporting of critical incidents, as well as situations that create the potential for critical incidents to occur. Both actual and potential or "near miss/good catch" events are reviewed through the region's critical incident review process.

All critical incidents reported within the RQHR are reviewed and reported to Saskatchewan Health as part of *The Critical Incident Reporting Regulations* under *The Regional Health Services Act*. The regulations require that regional health authorities report the occurrence of all critical incidents within three business days. The regulations also require that regional health authorities report the findings of their review, as well as recommendation to prevent recurrence, within 60 days. These findings and recommendations may be shared provincially to prevent similar incidents in other regions.

In the RQHR, 100 per cent of the critical incidents reported in 2006-2007 met the timelines for notification to Saskatchewan Health.

To increase the region's focus on patient safety and quality improvement, the RQHR created the *Patient Safety and Quality Support* portfolio in December of 2006. This portfolio includes the areas of Risk Management, Quality Improvement and Client Representative, which brings together departments with a specific focus on patient safety and quality support. The synergy within this portfolio will improve how incidents are reported, reviewed, followed-up and disclosed. This will be attained through increased collaboration, increased focus on systems design to improve safety and implementation of regional projects to enhance the culture of safety within the RQHR.

PATIENT SAFETY

In 2005-2006, the RQHR created a Patient Safety Task Force, with a mandate of establishing a patient safety agenda. Chaired by President and CEO Dwight Nelson, the task force membership include leaders from across the region's functional areas, two members of the RQHR, and two members from the general public. With recognition that many patient safety practices, quality assurance initiatives and internal staff safety protocols already exist within the region, the task force's role is to articulate a long-term patient safety vision and direction for the organization.

Since then, the Patient Safety Task Force has developed a patient safety vision commitment statement that will become the guiding principle for RQHR's patient safety plans and initiatives. There are also plans to conduct a survey in mid-2007 to gauge staff and physicians' perceptions of patient safety-related workplace attributes in the RQHR.

Patient safety continues to be the region's key priority.

FINANCIAL SUMMARY

The RQHR continues to provide quality health services with available resources. As a provincial and community provider of a full range of quality health services, education and research, the region managed challenges and achieved success in 2006-2007 in meeting the diverse health needs of our communities through the strength of our people, partnerships and personal responsibility for health.

The RQHR achieved a small surplus for 2006-2007, ending the year with an excess of revenue over expenditures of \$7.8 million. The surplus was achieved through the efforts of our staff and physicians to align the human and financial resources with the strategic priorities of the Region and the accountabilities of the provincial government.

The region continued to maintain quality health services and meet the financial challenges of rising costs by managing staffing vacancies and, where possible, implementing improvements in effectiveness and efficiency. The region is committed to wise stewardship and accountability for the people and resources entrusted to it.

REGINA QU'APPELLE HEALTH REGION 2006-2007 RESULTS

Number of days able to operate with working capital	(29.14)
Working capital ratio (current ratio)	.44
Surplus/deficit; as a percentage of actual operating expenditures	1.3%
Expenditures in program support funding pool as a percentage of total RHA operating expenditures	5.1%

CAPITAL COMMITMENTS AND EXPENDITURES

The region was pleased to receive \$6.7 million from the provincial government for clinical equipment and information technology. The funding enabled the region to continue work on upgrade of the Laboratory System and to purchase needed equipment such as a CO2 Laser for the operating room, an instrument sterilizer, an echocardiography machine, an ambulance and electric beds.

The region also appreciates and relies on the partnerships with the Hospitals of Regina Foundation and the Community Trust Funds to provide significant donations for the purpose of purchasing equipment and contributing to the costs of building or upgrading facilities. The Hospitals of Regina Foundation supported the major purchase of a new cardiac cath lab, as well as other equipment.

The Moosomin and District Health Care Foundation raised the community share of funding to support construction starting in 2006-2007 for the new Moosomin Integrated Health Facility. Planning continued on the Rawlco Centre for Mother Baby Care at the Regina General Hospital. Both these projects will continue into 2007-2008. In addition, expansion of the Broadview Medical Clinic was completed in 2006-2007, totally funded by the community.

Capital funding continues to be a challenge for the region, in terms of equipment, information technology and building infrastructure. The region, in partnership with the foundations and the provincial government, will continue to explore ways to increase funding to support these important investments.

FUTURE OUTLOOK/EMERGING ISSUES: INCREASED FOCUS OF SAFETY, IMPROVED ACCESS AND BETTER HEALTH OUTCOMES

Patient safety continues to be a priority for the RQHR along with the region's focus on providing quality, accessible health services for its residents and other communities that require specialized treatment.

In 2006-2007, the Patient Safety Task Force further advanced the patient safety agenda in the region by developing a patient safety commitment statement that will help guide the RQHR in its plans and initiatives. Later this year an RQHR staff culture sensitivity survey will be issued to determine the degree of safety-related workplace attributes that currently exist in the organization.

In addition, the Patient Safety Task Force has started identifying system-wide patient safety indicators and measures that will be reported as part of the organization's corporate balanced scorecard, a record of the RQHR's performance.

In the area of quality, accessible health services, in 2006-2007 the RQHR developed several initiatives to further improve access and respond to the needs of the region.

Several Primary Health Care Teams are operational in the region along with health-related partnerships with the community that improve the health status of residents, particularly within the more vulnerable population groups. Additional funding has enabled the RQHR to offer more diagnostic testing and in the process reduce the wait times for MRI or CT examinations. Recruitment of technical and professional staff continues to be an issue for the RQHR, similar to health systems across Canada. The lack of available sonographers in the past year resulted in less ultrasounds performed than required.

Health promotion and disease prevention is a major area of focus for the RQHR as health research strongly indicates that improved living conditions and key social factors influence health outcomes. Population Health has provided ongoing funding for a local community food store *Food for Life* recognizing that easy access to healthy food is fundamental to good health.

The demand for health promotion and disease prevention initiatives will become increasing priorities for the RQHR as the population ages, obesity rates continue to climb and the rate of chronic diseases further escalates, placing increasing demands on the health system.

Like health systems throughout Canada, the RQHR is challenged in meeting the needs of a growing and aging population. It is generally acknowledged that as people age, their demands on the health system increase and the type of services required changes. In developed countries, the incidence of chronic diseases, such as diabetes and heart disease, is rapidly increasing, placing significant burdens on health systems everywhere.

Along with a growing and aging population, the RQHR also has a rapidly growing young, aboriginal population. Due to the health status of many young aboriginal people -- poverty, poor access to health services and low educational attainment -- the health region is challenged to find innovative methods for delivering health services to this vulnerable group.

The major challenge health regions across the country continue to address is meeting public expectations within the available resources and funding available.

GOVERNANCE AND TRANSPARENCY: ESTABLISHING A TRUSTWORTHY AND ACCOUNTABLE ORGANIZATION

The mandate of the RQHR is to provide quality, accessible health services that meet the needs of its residents and people in southern Saskatchewan who rely on it for specialized services.

The RQHR is charged with two main areas of responsibility. The first is to assess the health care needs of the people it serves, prepare annual budget plans, deliver quality services and evaluate the services it provides. The second is to provide specialized health care for 465,000 residents in southern Saskatchewan through the two designated provincial hospitals in Regina.

The RQHR is responsible for the overall management and control of the health region. Pursuant to *The Regional Health Services Act*, the Authority is ultimately accountable to the Minister of Health to achieve the provincial and regional goals and objectives for health services.

Within this mandate, the Authority has set the overall direction for the organization and defined a strategic framework, which specifies the vision, mission and values of the organization.

The Authority assumes its role and responsibilities within the context of a governance policy framework of decision making and accountability and the powers of authority prescribed to it in *The Regional Health Services Act*.

The governance framework is driven by five fundamental components that facilitate board performance effectiveness. They include leadership, strategic direction, roles, processes and policies, and Authority relationships and development. In fulfilling its responsibilities, the Authority has established four standing committees: Executive Committee; Services and Programs Committee; Resource Accountability Committee; and the Community Partnerships Committee. In addition, the Authority has established three Community Advisory Networks to ensure that the Authority receives input and advice from local citizens.

All Authority members are appointed to serve on one or two of the Authority's standing committees and certain members have been designated to liaise with Community Advisory Networks. Each committee and network operate independently of the others. Authority members must travel extensively to attend meetings that are held throughout the region.

The Executive Committee is responsible for matters pertaining to governance. The Resource Accountability Committee is charged with oversight of areas related to finance, audit, human resources, facilities and capital resource infrastructure. The Services and Programs Committee is responsible for oversight of the region's service delivery model, particularly as it relates to providing accessible, quality and safe health services. The Community Partnerships Committee is responsible for oversight of the Authority's Community Advisory Networks, as well as relationships with the region's stakeholders and partners.

The 12 Board members of the RQHR are as follows:

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY

MEMBERS	ATTENDANCE
Bergman, Anita	90%
Boutilier, Lloyd	80%
Connolley, Pat	100%
Elford, Loretta	100%
Everett, Marie	100%
Fisher, Tyronne	90%
Knuttila, Murray	70%
Leier, Bryan	100%
Poitrass, Bev	80%
Semenchuck, Gary	70%
Taylor, Alex	90%
Ward, Chuck	100%

COMMITTEE MEMBERSHIP AND MEETING ATTENDANCE

Resource Accountability Committee	Executive Committee	Services & Programs Committee	Community Partnerships Committee
- Finance - Audit - Accreditation - Capital & Finance - Human Resources	- Meetings & Agendas - CEO & Liaison & Evaluation - Board/Development - Education - Board Policy - Development/Review - Strategic Accountability	- Quality Care - Patient Safety - Medical Affairs	- Community Advisory Networks - Public Relations - Partnerships
Members Attendance			
Bergman, Anita 100%	Bergman, Anita 60%	Bergman, Anita 100%	Bergman, Anita 100%
Boutilier, Lloyd 69%	Boutilier, Lloyd 55%	Elford, Loretta 83%	Connolley, Pat 100%
Connolley, Pat 85%	Connolley, Pat 100%	Everett, Marie 91%	Elford, Loretta 100%
Elford, Loretta 86%	Knuttila, Murray 89%	Fisher, Tyronne 100%	Everett, Marie 78%
Fisher, Tyronne 86%	Leier, Bryan 89%	Knuttila Murray 82%	Knuttila, Murray 100%
Leier, Bryan 85%		Poitrass, Bev 91%	Ward, Chuck 100%
Poitrass, Bev 100%		Semenchuck, Gary 100%	Poitrass, Bev 50%
Semenchuck, Gary 71%		Taylor, Alex 60%	Taylor, Alex 100%
		Ward, Chuck 80%	

Note: Re: Executive Committee:

Anita Bergman stepped down in Oct 06. Various members rotated in to make the 5th member of the committee.

Nov/Dec 06 – Semenchuck, Gary – 100%

Jan/Feb 07 – Fisher, Tyronne – 100%

Mar/Apr 07 – Elford, Loretta – 100%

For biographical and contact information regarding the board members of the RQHR, visit the website at www.rqhealth.ca.

In August 2002 the passing of *The Regional Health Services Act* not only brought 12 health regions into existence, but it also gave them the formal mandate to establish Community Advisory Networks (CAN).

The goal of these networks was to ensure that health authorities would benefit from the advice and input of local citizens when setting priorities and direction for health services. The importance of maintaining effective links with community leaders, consumer groups, education and social agencies was seen as a priority for CANs.

In response to this mandate from government, the Authority, passed a motion that formally approved a framework of four geographically based CANs composed of up to 15 persons each to serve the health region. The new networks were the Central Community Advisory Network, East Community Advisory Network, Regina Community Advisory Network and North Community Advisory Network.

December 2006 marked the end of the first term of Network appointments, at which time, the Authority, in consultation with CAN members, reassessed the structure of the networks. The Authority decided that starting in 2007 it would reduce the number of networks from four to three: one in Regina and surrounding area; the second representing the region's rural area; and the third composed of youth between the ages of 16 and 25 years.

Information about the RQHR is available on the region's website at www.rqhealth.ca and in its quarterly publication *HealthNews*. The website contains information on programs and services, news items, and general health information. *HealthNews*, which is delivered to each household in the region, contains the Chairperson's message and advice about healthy living, as well as information on programs and services offered by the region.

The region also has a responsibility to communicate with all of its employees, as well as some 500 physicians who work within the region but are not all employees. To ensure timely communication, a weekly electronic newsletter, *e-link*, is produced for staff and a monthly publication for physicians, *The Physician*.

PAYEE DISCLOSURE LIST

The following payee disclosure list is provided to the public as a requirement of all Regional Health Authorities, and as part of the commitment of the RQHR to transparency and accountability.

Please note that dollar amounts to individuals may include overtime payments; weekend, evening or other shift premiums; other premiums; and reimbursement for out-of-pocket expenses such as meals or travel.

According to *The Local Authority Freedom of Information and Protection of Privacy Act* employee salaries are not considered personal information and are not exempt from public disclosure.

Personal Services

Listed are individuals who received payments for salaries, wages, honorariums, etc., which total \$50,000 or more.

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Abadiano, Linda	\$ 138,099	Andres, Jean	\$ 53,937	Balak, Janet	\$ 79,451
Abbas, Zahid	68,916	Andrews, Melissa	57,555	Balch, Laurie	74,219
Abbott, Yvonne	51,577	Andrews, Naomi	63,852	Baldock, Rita	65,527
Abell Thome, Cathie	73,591	Angielski, Verna	85,300	Baldock, Tara	57,008
Abello, Sandra	67,737	Antal, Jonathan	88,317	Baldos, Evelyn	107,661
Abello, Timothy	50,208	Antoine, Elaine	50,555	Balfour, Don	54,200
Abera, Elsbet	52,968	Antonio, Angela	61,996	Ball, Dorothy	56,885
Abii Ndoh, Edith	82,001	Apperley, Barry	68,639	Ball, Ronald	64,636
Ackerman, Candyce	51,110	Apperley, Jessica	53,861	Balycky, Annette	78,657
Adair, Carol	67,048	Appleby, Heather	63,173	Bamhour, Heather	64,878
Adamiak, Bonnie	60,684	Arams, Stefanie	60,995	Banbury, Phoebe	67,949
Adamko, Brenda	61,869	Arbuthnot, Blair	85,156	Bancescu, Shelda	78,931
Adams, Jody	64,653	Argue, Jocelyn	58,077	Baniulis, Margaret	86,359
Adams, Michael	75,678	Arguin, Brie	55,842	Bank, Karen	58,633
Adcock, Stanley	63,785	Arguin, Len	80,177	Banks, Muriel	54,620
Adeyoku, Motunrayo	86,635	Arguin, Patricia	65,265	Banning, Sharon	73,754
Ahlquist, Elijah	71,381	Arklie, Chris	59,329	Bannon, Mervin	54,481
Ahmed, David	116,321	Armbruster, Robert	57,900	Baran, Vivian	58,541
Aikens, Chelsea	51,476	Armstrong, Bonnie	50,410	Barber, Charles	52,618
Airir, Abdellah	79,249	Armstrong, Shawn	67,038	Barber, Ellen	52,210
Akan, Joseph	58,180	Arndt, Rachel	61,552	Barber, Susan	62,772
Alarcon, Irene	64,353	Arnold, Arlene	53,949	Bardal, Terry	77,992
Aldinger, Anita	94,956	Arnold, Kevin	63,862	Barham, Carol	56,858
Aldous, Lee	52,355	Arscott, Susan	60,631	Barkman, Louise	50,643
Alexson, Delphine	56,341	Arvidson, Kristin	69,014	Barnard, Phyllis	52,321
Alfano, Beverly	79,079	Asante, Ethelda	84,447	Barnsdale, Brenda	50,213
Alfonso, Brenda	75,630	Aschenbrenner, Jeannette	84,435	Baron, Michael	68,343
Ali, Meimuna	67,241	Askin, Susan	62,562	Barr, Taryn	72,601
Aljada, Ibrahim	170,515	Assman, Lori	109,787	Barrett, Pauline	67,732
Allan, Bruce	65,798	Ast, Bonnie	64,111	Barth, Carol	70,880
Allard Johnson, Michelle	62,753	Ast, Marie	89,880	Bashutski, Melanie	53,979
Allen, Annamarie	67,647	Attwood, Angela	71,890	Bast, Darlene	61,008
Allen, Dianne	57,965	Austin, Carol	55,536	Bateman, Enid	67,670
Allen, Marla	57,186	Ayer, Janet	56,262	Bater, Charolett	56,482
Allerdings, Marilee	67,866	Baade, Alyssa	58,777	Bathgate, Debra	73,680
Almassy, Nicole	53,805	Baber, Carla	53,689	Bauer, Egistina	75,535
Alport, Edward	397,989	Babuik, Richard	73,312	Baumgartner, Karen	66,150
Alport, Lois	58,047	Bachman, Agnes	55,494	Baumgartner, Nina	57,634
Alston, Candace	80,040	Bachmann, Linda	87,884	Bear, Shannon	54,082
Althouse, Leanne	56,600	Bachorick, Beverly	56,707	Bearss, Leslie	70,951
Altwasser, Tara	56,527	Bachtold, Jodie	61,122	Beaton, Debbie	85,104
Ambrosia, Erin	51,438	Backlin, Dale	65,104	Beattie, Kathryn	62,335
Amon, Bree	58,712	Bacon, Peggy	68,866	Beauchesne, Elaine	61,354
Amy, Gwen	61,599	Badgley, Catherine	107,663	Beaurivage, Barbara	51,254
Amyotte, Bernadett	62,938	Baer, Bonnie	80,827	Bechard, Carol	88,845
Amyotte, Stacey	60,165	Baer, Elizabeth	78,540	Beck, Jeanette	63,707
Anderson, Carol	66,620	Baht, Ryan	81,971	Becker, Gail	61,885
Anderson, Carolyn	66,644	Bailey, Patricia	66,761	Becker, Jill	50,089
Anderson, Elizabeth	67,112	Bailey, Valerie	50,791	Begg, Elizabeth	102,229
Anderson, Janet	66,530	Baily, Karen	67,376	Beggs La Riviere, Gail	69,061
Anderson, Laurie	53,897	Bain, Diane	62,873	Beggs, Ryan	77,508
Anderson, Sandra	61,237	Baiton, Susan	81,638	Behl, Alicia	68,570
Anderson, Sharon	78,999	Bajo, Arnulfo	127,127	Behnke, Wanda	65,833
Anderson, Sheila	60,452	Baker, Tricia	68,939	Behr, Glen	84,300

INDIVIDUAL

PAYMENT

Beisel, Patricia	\$ 90,078
Beitel, Catherine	74,876
Beitel, Laura	79,163
Beitel, Linda	80,737
Belay, Sherry	140,090
Bell, Alison	64,241
Bell, Debbie	65,468
Bell, Jerry	75,034
Bell, Karen	56,364
Bell, Kerri	75,467
Bell, Stacey	60,589
Bellamy, Judith	65,487
Bellavance, Gord	73,262
Bellisile, Tracie	73,492
Bender, Barbara	68,012
Benedik, Corinne	72,795
Benitez, Engelbert	80,652
Bennett, Lori	60,904
Benoit, Deborah	71,710
Benoit, Linda	66,414
Benz, Cara	60,438
Bereti, Lorilee	72,875
Bereziuk, Chantel	82,501
Berezowski, Mark	61,723
Bergquist, Lorie	86,593
Bernhardt, Geraldine	83,924
Betz, Brenda	67,475
Beutel Fox, Bonny	51,055
Beutler, Cheryl	50,722
Beutler, Linda	72,004
Beutler, Muriel	74,936
Bichel, James	71,848
Bidwell, Nicole	79,714
Biech, Lauri	64,963
Bien, Marilyn	65,077
Bigalky, Angela	55,214
Bigalky, Jodie	62,579
Bigelow, Jeannette	63,001
Bilan, Denise	54,564
Bilan, Michelle	53,419
Bilkey Behrns, Phyllis	63,570
Bily, Kathy	59,397
Birchard, Lynn	65,559
Bird, Linda	84,221
Bird, Marilyn	52,420
Bird, Vernia	73,487
Birns, Beverley	81,263
Birns, Heather	55,159
Bishop, Barbara	70,510
Bishop, Sharon	67,200
Bissett, Sandra	73,173
Bizzarri, Arlene	71,967
Bjelland, Pamela	59,929
Bjerland, Glorianne	63,574
Black, Marilyn	84,665
Blackmer, Barb	63,014
Blackwell, Maitland	76,179
Blair, Brenda	67,391

INDIVIDUAL

Blair, Ruth	
Blommaert, Patricia	
Blomme, Elaine	
Blondeau, Kendra	
Blondeau, Rena	
Bloomfield, Shawn	
Bobetsis, Gus	
Bobetsis, Spero	
Boczulak, Dianne	
Bodani, Jayalaksh	
Bodnarchuk, Linda	
Bodnard, Stacey	
Bodnaryk, Sharon	
Boehlen, Reid	
Boehm, Darryl	
Boehmer, Mavis	
Boey, Joan	
Bogdan, Janet	
Bolen, Carla	
Bolen, Karyn	
Bondarchuk, Eric	
Bonderoff, Hazel	
Bonk, Brenda	
Booker, Elizabeth	
Booker, John	
Booty, Kerry	
Bordas, Fred	
Bordyniuk, Monique	
Bosovich, Darlene	
Boucher, Scott	
Boudreau, Suzanne	
Bouey, Charlene	
Bouey, Mavis	
Boulanger, Debbie	
Boulet, Nathan	
Bourdages, Lori	
Bourget, Helen	
Bourret, Lavonne	
Bowditch, Elsie	
Bowen, Francis	
Bowman, Jane D	
Boyachek, Michelene	
Boyd, Darlene	
Boyd, Marion	
Bradley, Shelly	
Brady, Janice	
Brady, Ray	
Braithwaite, Donna	
Braithwaite, Rhonda	
Brand, Nicole	
Brandt, Aimee	
Braun, Dona	
Braun, Jacquelin	
Bremner, Carolyn	
Brentnell, Wanda	
Brewer, Jennifer	
Brewster, Cara	
Brezinski, Lori	

PAYMENT

\$ 77,864
78,978
68,831
52,524
63,524
50,601
82,870
64,270
80,417
344,521
67,551
63,031
68,415
63,505
82,789
64,813
67,444
66,047
83,453
74,284
91,640
65,331
56,792
62,893
92,330
53,228
73,427
66,225
64,029
58,986
99,293
63,197
52,467
56,074
73,169
52,946
59,437
58,276
63,698
265,766
88,386
65,585
78,540
67,861
50,538
69,230
60,821
63,172
64,662
52,317
62,227
69,205
99,813
91,457
72,399
58,932
63,541
96,525

INDIVIDUAL

Brian, Daniel	
Briand, Sandra	
Bridgeman, Greg	
Briere, Bonnie	
Briere, Celeste	
Brigidear, Marie	
Brin, Jolyn	
Brisbois, Elva	
Bristol, Ken	
Broadfoot, Blair	
Brochu, Angela	
Brochu, Mark	
Brock, Bonnie	
Brockman, Anita	
Brockman, Shannon	
Brodziak, Shelley	
Bromm, Jennifer	
Brooks, Denise	
Brooks, Jennifer	
Brossart, Cory	
Brotzel, Susan	
Broughton, Marlene	
Brown Lewis, Murieka	
Brown, Alison	
Brown, Beverly	
Brown, Bonnie	
Brown, David	
Brown, Janice	
Brown, Jeannine	
Brown, John	
Brown, Marla	
Brown, Marlene	
Brown, Nancy	
Brown, Shauna	
Brown, Sheila	
Brownlee, Dianne	
Brubacher, Mary	
Bruce, Colleen	
Brundage, Diane	
Bruneau, Louise	
Bryant, Lenore	
Brydon, Daniel	
Bryson, Genevieve	
Buchanan, Linda	
Buckoski, Mary	
Buddecke, Judith	
Budinski, Holly	
Bueckert, Devin	
Bueckert, Kimberly	
Buemio Campbell, Cecilia	
Buerger, Robyn P	
Bugiera, Claudette	
Bugyi, Shari	
Buhler, Tracy	
Buller, Bonnie	
Bullivant, Linda	
Bullock, Linda	
Burant, Colette	

PAYMENT

\$ 58,153
71,277
57,912
80,848
74,815
65,982
67,731
55,222
76,494
76,501
61,072
62,402
70,048
78,669
55,974
67,866
62,744
79,235
64,905
72,265
67,643
88,004
68,733
64,316
55,273
69,837
63,440
65,442
89,293
90,962
55,207
73,083
81,896
52,959
65,128
71,054
87,102
62,706
61,709
75,237
76,024
66,732
96,676
67,654
74,118
76,459
74,268
83,094
57,089
87,882
63,063
68,688
57,684
62,276
54,777
63,186
56,032
63,939

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Burant, Rodney	\$ 60,861	Caro, Josephine	\$ 61,584	Christopherson, Clifton	\$ 51,562
Burchi, Jo Anne	68,027	Carr, Gary	51,594	Christopherson, Kim	54,270
Burkitt, Shannon	74,189	Carr, James	53,658	Chrusch, Wendy	126,354
Burla, Tamara	82,077	Carr, Lee Ann	67,417	Chu, Florence	67,126
Burnay, Gisele	66,630	Carr, Lisa	58,395	Churchman, Carol	71,320
Burns, Beverley	53,958	Carriere, Barbara	50,391	Churko, Donna	71,927
Burns, Carol	61,430	Carson, George	215,018	Cibart, Janice	63,444
Burns, Lorraine	55,529	Carson, Ramona	56,232	Ciuca, Judith A	72,960
Burns, Michele	60,420	Carswell, Gaylene	78,854	Clare, Robert	79,152
Burrell, Theresa	60,313	Carton, Susan	71,447	Clark Downton, Cynthia	50,498
Burton, Linda	81,065	Carubio, Ruth	115,428	Clark, Carole	69,288
Busch, Julie	66,344	Carvell, Leona	66,747	Clark, Jamie	66,192
Buschow, Carmen	53,396	Casemore, Beverley	51,522	Clark, Velda	91,239
Buss, Florence	71,232	Casemore, Chris	65,131	Clarke, Charlene	55,451
Butler, Joyce	77,206	Casemore, Janel	53,550	Clarke, Deborah	51,310
Butler, Karen	78,508	Caufield, Lana	65,098	Clarke, Norman	66,776
Butler, Marjorie	62,835	Cavers, Stephanie	63,336	Clarkson, Tracy	70,361
Buzash, Robert	64,674	Cazakoff, Sharon	76,776	Clein, Lawrence	208,888
Buzila, Dora	87,793	Cerato, Janice	65,341	Clement, Loreen	73,928
Bye, Myrna	78,047	Chabot Baker, Jeanne	56,851	Clemmenssen, Jolene	58,583
Byrne, Anna	79,231	Chalupiak, Carmen	59,570	Climenhaga, Darci	55,829
Byrne, Doris	59,820	Chamberlin, Lisa	73,311	Clouse, Shelley	50,138
Cabacungan Ecim, Clarina	67,906	Chambers, Lynne	56,361	Coates, Anne	84,955
Cabigon, Enrico	402,811	Chamney, Hali	60,275	Coates, Nancy	85,521
Caburao, Crystal	60,044	Chan, Michael	58,770	Coates, Rosemary	57,148
Cadrin, Louise	57,945	Chanig, David	69,716	Cobbledick, Bev	56,458
Caissie, Wendy	61,397	Chapman, Brenda	78,869	Coburn, Ronald	79,783
Caithcart, Richard	73,729	Chapple, Alan	97,927	Code, Barbara	68,017
Calder, Dawn	110,609	Chard, Stephen	62,293	Colby, Donna	59,978
Calder, Doug	112,559	Charette, Brenda	67,830	Colclough, Arthur	77,526
Calhoon, Mae	74,952	Charleson, Sharon	83,281	Cole, Kendra	70,015
Calland, Bryan	91,810	Chartier, Lanaya	80,681	Coleman, Jean	55,141
Callum, Marilyn	69,144	Chartrand, Rhonda	62,936	Coles, Kathy	66,265
Calvin, Jennifer	55,561	Chaykowski, Jaclyn	52,467	Colin, Ronald L	92,917
Camara, Clorinda	52,025	Cheney, Janet	65,330	Connolly, Trevor	211,381
Cameron, Bonnie	81,649	Chepil, Julie	64,136	Contreras, Gisela	65,096
Cameron, Faith	109,475	Chernesky, Karen	85,542	Cook, Laurie	66,539
Cameron, Julie	58,320	Cherwaty, Darren	84,225	Cook, Stephanie	76,810
Cameron, Katherine	70,226	Cherwaty, Gail	67,541	Coombs, Leann	52,587
Cameron, Rita	69,981	Chesters, Patricia	56,005	Coons, Pamela	52,343
Cameron, Tina	63,047	Chestney, Sherry	59,415	Cooper, Christina	64,292
Camins Olmstead, Jocelyn	80,150	Chevalier, William	67,044	Cooper, Daniel	65,300
Campbell Reid, Marjorie	52,810	Chew, Foong Mei	62,180	Cooper, Ronald	73,336
Campbell, Daniel	55,510	Chijide, Valda	218,509	Corkery, Judith	67,179
Campbell, Gordon	59,307	Chipanshi, Mary	54,952	Cornet, Jacqueline	57,106
Campbell, Jennifer	60,509	Chipurda, Romana	51,894	Corscadden, Wendy	56,094
Campbell, Margaret	51,307	Chisholm, Joanne	93,109	Cortes, Stacey	52,038
Campbell, Shannon	96,649	Chomos, Heather	64,247	Costache, Erin	68,450
Cano, Laura	70,563	Chomyn, Terry	67,170	Cote, Marion	63,775
Capewell, Kathryn	64,892	Chorney, Linda	78,508	Cote, Shannon	66,844
Cardwell, Kenneth	51,337	Chorneyko, Anita	78,205	Coulter, Bill	89,211
Cargill, Brad	79,492	Chretien, Terry	52,902	Coulter, Cindy	58,326
Carignan Young, Joanne	56,348	Christensen, Donna	76,162	Coulthard, Maureen	78,286
Carlson, Ed	61,807	Christensen, Robert E	62,804	Coupal, Alicia	56,817
Carlson, Lorri Ann	96,523	Christiansen, Jeffrey	75,331	Cournoyer, Elizabeth	51,708
Carlson, Stephanie	79,273	Christmann, Alison	52,384	Cox, Twana	68,033
Carlson, Teresa	74,014	Christoph, Valerie	124,794	Cozine, Denise	66,361
Carman, Chris	52,132	Christopherson, Catherine	63,540	Craig, Angeline	62,673

GOVERNANCE AND TRANSPARENCY

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Craig, Dawn	\$ 68,391	Debassige, Laura	\$ 87,260	Donald, Heather	\$ 78,508
Cramm, Marlene	53,508	Debesai, Michael	58,735	Donauer, Sharlene	62,902
Craven, Valorie	66,212	Decano, Felina	134,033	Donison, Jennifer	62,663
Crawford, Judy	58,950	Deets, Barbara	73,723	Donnelly, Melissa	103,562
Crerar, Elsie	71,178	Degelman, Marilyn	65,555	Donovan, Lisa	113,471
Creurer, Jeanne	53,807	Degooijer, Joy	54,812	Dorgan, Heather	77,872
Crittenden, Shirley	63,669	Deis, Patricia	50,994	Dornstauder, Kenneth	78,508
Crone, Darlene	63,492	Deis, Patti	63,878	Doucette, Doreen	50,940
Crookshanks, Carolyn	65,552	Dejose, Breanne	53,972	Dovell, Peggy	82,059
Cross, Beverley	60,939	Dela Cruz, Theresa	92,698	Downey, Scott	74,278
Cross, Bryan	80,025	DeLaforest, Irene	51,034	Drackett, Nancy	67,404
Crossley, Laurie	56,640	Delainey, Linda	67,457	Drake, Peggy	76,467
Crowe Salazar, Noela	51,182	Delsnider, Allison	58,592	Draper Ziglo, Kelli	54,243
Crowe, Nanciann	52,289	Demeria, Anne	67,810	Dreher, Annemarie	58,842
Crowley, Karen	66,945	Demerse, Vicki	57,850	Droder, Danielle	73,174
Crozier, Margaret	80,298	Demoskoff, Darlene	71,312	Dubin, Michelle	62,623
Crozier, Stella	61,498	Denham, Terence	51,602	Duchak, Catherine	67,792
Cruise, Loretta	89,700	Denny, Barbara	78,508	Dufour, Debra	54,663
Crump, Irene	52,005	Denouden, Kathleen	64,620	Dufour, Debra	65,523
Cuddington, Terry	81,163	Dentremont, Andre	68,321	Dugan, Ilo	56,950
Culig, Ernesto	64,877	Derow, Lovadie	52,495	Duke, Cheryl	66,468
Culig, Glory	145,291	Derrick, Roy	111,760	Dumelie, Patrick	87,812
Culling, Carla	70,632	Desjardins, Annette	62,854	Dumont, Edgar	65,737
Cullins, Joan	52,293	Desnomie, Harry	60,415	Dumont, Loreen	68,275
Currie, Lynne	97,872	Desrochers, Miranda	64,450	Duncan, Shelley	55,577
Currie, Marg	63,971	Desrosiers, Bernard	70,920	Duncan, Wendy	70,461
Currie, Nicolle	69,287	Devaraj, Ramachand	279,847	Duncanson, Judith	68,114
Curry, Glenna	81,000	Devenney, Stella	68,175	Dunfield, Vera	97,683
Curtis, Deborah	82,863	Devine, Sandra	66,521	Dunford, Lynette	71,495
Curtis, Patricia	64,532	Dewald, Connie	106,563	Dunn, Shauna	68,764
Curtis, Rob	70,679	Dewitt, Kathryn	61,023	Dunphy, Corry	58,780
Cwynar, Chris	68,199	Dhaliwal, Mohinder	63,083	Duperreault, Paul	51,476
Daaza, Rosemary	76,224	Dhillon, Kam	174,350	Dupont, Heidi	59,244
Daborn, Jacquelin	59,443	Diana, Dinah	53,034	Dutchak, Kristin	113,382
Dahl, Diana	58,406	Dickie, Crystal	52,224	Dvernichuk, Ranel	57,049
Dakiniewicz, Lori	53,248	Dickie, Kim	57,861	Dybwig, Colleen	74,288
Daku Owens, Dianne	86,614	Dickie, Sheila	60,435	Dyck, Darla	73,534
Daku, Bonnie	53,306	Dickie, Stephen	99,695	Dyck, Donna	66,366
Daku, Jan	69,949	Dickin, Tamara	64,376	Dyck, Jennifer	77,856
Daly, Jason	63,224	Dickson, Diane	65,447	Dyer, Deborah	59,146
Dancsok, Marie	61,247	Dickson, Karen	67,149	Dyker, Lynn	54,932
Danielson, Carla	53,646	Dielschneider, Lori	101,036	Dynna, Lisa	64,444
Danielson, Deborah	89,076	Dielschnieder, Lynne	58,829	Dzuba, Mandi	57,911
Danylcuk, Mike	64,028	Diener, Tania	241,780	Earnshaw, Karen	82,428
Danyliw, Brian	84,071	Dima, Anda	61,620	Earnshaw, Theresa	111,728
Danyliw, Carol	62,981	Dimaano, Maria	67,129	East, Lori	75,137
Daschle, Lisa	65,319	Dimler, Marcia	66,683	Easton, Bonnie	78,103
Davalos, Pablo	55,961	Dixon, Lana	50,696	Eberts, Lori	78,544
Davidowich, Lorrie	92,387	Dixon, Lois	71,305	Eckert, Laurie	72,530
Davidson, Barbara	113,443	Dizy, Jacquelin	55,560	Edge, Linda	95,874
Davidson, Colleen	57,730	Dmyterko, Sylvia	63,625	Edmands, Carol	54,373
Davidson, Vivian	75,517	Dmyterko, Zenia	63,720	Edmands, Jeff	80,078
Davies, Karen	54,038	Doan, Pamela	52,267	Edmands, Laura	54,025
Davies, Valerie	97,171	Dobra, Sandra	68,689	Edwards, Joanne	70,266
Dawn, Brandi	51,454	Dobson, Marlene	60,640	Edwards, Nancy	61,379
Dawson, Lorna	73,636	Doering, Frances	55,061	Ehrlich, Victoria	77,596
Day, Christine	66,540	Doerksen, Norma	56,132	Ehrmantraut, Donald	89,916
Dayne, Jacquelen	70,069	Dolha, Lloyd	76,306	Eichhorst, Helga	66,414

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Ekberg, Roberta	\$ 76,398	Fedirko, John	\$ 115,807	Fouhse, Brian	\$ 60,351
Elder, Marian	62,817	Fedirko, Lori	60,990	Found, Jodi	50,662
Eley, Maureen	60,892	Fehr, Elaine	62,728	Fowler, Linda	59,414
Elford, Denae	61,644	Fehr, Wendy	65,024	Fox, Colleen	51,965
Ell, Grettalyn	91,689	Feil, Shauna	59,085	Fraipont, Wendy	64,011
Ell, Sandra	65,192	Feltin, Susan	64,194	Francis, Barbara	71,496
Eil, Sharlene	52,595	Ferguson, Janet	56,887	Francis, Lynda	78,658
Elliott, Heather	73,102	Ferguson, Kathy	236,140	Fraser, Deborah	66,996
Elliott, Virginia	97,698	Fernandez, Janis	66,139	Fraser, Holly	78,772
Ellis, Carla	66,932	Ferris, Doug	55,907	Fraser, Judith	125,611
Ellis, Sharon	61,075	Fesciuc, Kimberley	60,431	Fraser, Nicole	64,558
Ellis, Tracey	92,682	Feser, Janice	60,890	Frasz, Cheryl	69,117
Emeka Okere, Elizabeth	56,851	Fetch, Bobby	53,388	Fraynak, Joanne	65,290
Emery, Alison	61,035	Fetch, Jarret	54,574	Freeman, Bonnie	65,554
Engel, Keith	55,441	Fichter, Kim	59,826	Freeman, Joanne	74,161
Engel, Linda	69,903	Fidler, Bozena	51,492	Freeman, Karol	67,128
Engel, Patricia	76,764	Field, Cathy	55,041	Frey, Angela	58,014
Engle, Kathleen	96,081	Field, Susan	67,931	Frier, Debbie	63,452
Engen, Kathy	102,509	Filipchuk, Monica	56,465	Friesen, Amy	59,555
English, Darcy	68,766	Filippi, Shelly	88,770	Friesen, Della	62,486
Enns, Adine	51,565	Fingas, Gloria	55,275	Friesen, Wendy	73,449
Enright, Arlene	78,127	Fiorante, Connie	66,485	Frischholz, Tanis	66,051
Entner, Darren	72,726	Fischer, Chandra	54,375	Frisko, Renee	62,862
Erfurt, Carolyn	80,261	Fischer, Claire	63,217	Fritz, Lola	55,774
Erickson, Heather	71,728	Fishbook, Dayna	59,954	Frohlick, Jill	55,007
Erickson, Jennifer	54,383	Fisher Phillips, Heidi	78,516	From, Sandra	78,350
Erickson, Judith	66,008	Fisher, Monique	87,275	Fromm, Linda	63,172
Erman, Connie	56,816	Fitzgerald, Jeremiah	84,037	Fry, Brenda	56,043
Eros, Hazel	63,922	Fitzsimmons, Donald W	65,128	Fry, Dianne	70,443
Erwin, Dre	79,757	Fitzsimmons, Wesley	66,478	Fry, Margaret	51,987
Escanlar, Anabelle	78,142	Fizzard, Sheldon	78,266	Fuchs, Karen	63,898
Essien, Benjamin	57,000	Flaman, Deborah	59,609	Fuhro, Heather	61,115
Euteneier, Sandra	83,219	Flaman, Jeanne	50,713	Fullerton, Shelly	51,041
Evans, Donna	63,163	Flaman, Nancy	82,217	Funke, Annamarie	62,194
Evans, Donna	147,093	Flaman, Sharon	77,248	Gabel, Grant	81,676
Evans, Leah	64,712	Fleece, Jason	77,472	Gabel, Leslie	67,389
Evans, Lorna	89,104	Flegel, Joanne	63,623	Gabora, Balynda	63,835
Ewart, Brian	59,113	Flengeris, Helen	61,952	Gaboury, Adele	50,914
Exner, Joann	73,118	Fletcher, Rhonda	60,435	Gabriel, Melissa	69,508
Fadare, Deborah	72,442	Flood, Ramona	68,149	Gadica, Sandra	66,400
Fahlman, Barbara	50,688	Fluter, Lenore	68,217	Gallagher, Roxanne	76,076
Fahlman, Joann	54,111	Fohr, Chris	71,104	Gallais, Nicole	59,872
Fairbairn, Pamela	50,549	Foley, Darlyn	53,115	Garchinski, Lori	76,290
Fairgrieve, Trace	63,337	Folgering, Tina	56,566	Gardner, Linda	58,573
Famulak, Jackie	53,490	Folk, Maria	55,304	Garner, Dawn	72,504
Farkas, Lynnmarie	61,473	Folk, Ronald	72,534	Garner, Donald	63,589
Farley, Margaret	69,058	Folk, Trina	61,319	Garratt, Nancy	54,748
Farmer, Carol	56,180	Fonger, Carol	64,932	Garratt, Sharon	92,428
Farnell, Sheila	59,085	Forberg, Ryan	57,940	Garstin, Connie	64,156
Farrell, Grace	69,820	Forbes, Heather	64,518	Gartner, Anne	69,022
Farrow, Vicki	60,675	Ford, Grace	62,804	Garven, Terri	66,839
Faucher, Lyanne	65,111	Ford, Laura	62,526	Gaspar, Jennifer	67,950
Fauchon, Michelle	74,211	Fornwald, Elizabeth	56,904	Gate, Melissa	80,174
Faye, Ian	95,725	Forrest, Melissa	53,230	Gattinger, Clare	65,500
Fecho, Karen	52,206	Forsberg, Peggy	64,218	Gaudry, Jacquelin	60,895
Federko, David	75,167	Forshner, Ruby	67,346	Gauthier, Debbie	62,699
Federko, Marion	50,366	Foster, Lori	69,783	Gawley, Barbara	70,526
Federspiel, Karen	66,519	Foster, Monica	70,852	Geall, Bonnie	75,706

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Gebhard, Victoria	\$ 61,494	Gottselig, Darryl	\$ 67,189	Hadwen, Marilyn	\$ 61,208
Gee, Kin	50,666	Goud, Bonnie	55,467	Hagen, Naomi	75,752
Genoves, Wilbert	74,794	Goudreau, Robert	75,178	Haid, Lori	60,607
Gentles, Shirley	117,242	Goudy, Myles	58,121	Haines, Winnifred	69,824
Gerein, Brenda	67,958	Graeber, Sally	56,748	Hains, Deana	62,388
Gerein, Ruth	56,657	Graessli, Dea	64,579	Halbgewachs, Maxine	62,599
Gerhardt, Theresa	67,904	Graff, Yvonne	79,496	Hale, Barbara	66,652
Germaine, Sandra	77,342	Graham, Arlene	68,279	Haleem, Fatima Za	61,934
Gerster, Yvonne	60,409	Grainger, Valerie	55,741	Hall, Collette	98,816
Gessner, Dusten	62,878	Grammatico, Dino	411,957	Hall, Darla	82,669
Gettle, Peggy	57,199	Grand, Stephanie	74,597	Hall, Shirley	59,508
Getz, Alice	105,900	Grandish, Susan	87,789	Hall, Trevor	85,116
Ghaniabadi, Dianna	188,045	Granello, Yvonne	67,410	Hallborg, Deanna	59,637
Gibson, Brenda	56,373	Granger, Morag	83,072	Halldorson, Hallie	69,820
Gibson, David	61,891	Grant, Marnie	50,559	Hamelin, Paula	53,869
Gibson, Drew	61,037	Grasby, Murray	60,746	Hameluck, Paul	72,681
Gibson, Jeff	117,135	Gray, Carolyn	76,929	Hamilton, Mary	71,070
Gibson, Sandra	51,807	Greaves, Annemarie	70,556	Hanna, Shari	63,866
Gieg, Brian	64,823	Greaves, Patricia	63,015	Hannah, Rhonda	71,306
Gienj, Shirley	68,071	Grebinsky, Cindy Lou	82,826	Hannah, Suzanne	66,198
Giesbrecht, Colin	63,772	Green, Carla	79,130	Hansinger, Sonia	62,099
Giesinger, Katherine	64,535	Green, Dianne	64,166	Hanson, Brenda	102,132
Gilbert, Ingrid	71,673	Green, Lenore	51,987	Hanson, Nancy	58,145
Gilbert, Jennifer	63,796	Greene, Verla	64,761	Hanson, Trisha	58,416
Giles, Penny	52,394	Greenwood, Mary Lou	58,153	Harder, Brenda	58,152
Gilewicz, Dennis	92,028	Greenwood, Pat	74,517	Harder, Ruth	56,015
Gilewicz, Eileen	65,357	Gregoire, Barbara	61,467	Hardy, Marion	53,461
Gill, Marianne	65,773	Gregory, Laura	50,829	Harker, Kendra	63,030
Gill, Ricky	55,340	Griffin, Denise	58,243	Harkness, Cara	70,894
Gillanders, Jennifer	68,652	Griffiths, Tara	78,818	Harle, Connie	69,203
Gillespie, Carla	56,517	Grigg, Karlee	63,928	Harmer, Jack	61,525
Gillespie, Heather	53,112	Grills, Gloria	55,259	Harper, Catherine	50,884
Ginter, Terrance	50,885	Grimm, Helen	79,453	Harris, Charlotte	55,983
Giokas, Shirley	74,758	Gronhovd, Wanda	63,712	Harris, Yvonne	71,520
Girard, Susan	63,127	Gronick, Sabrina	55,412	Harrison, Heather	60,684
Giroux, Suzanne	57,049	Gross, Linda	77,226	Harrison, Ian	67,005
Glasser, Carol	81,360	Gross, Tracy	61,431	Harrison, Kimberley	63,688
Glasser, Lorna	60,093	Grund, Tracy	62,503	Harrison, Lorrie	61,730
Glendenning, Lorraine	80,956	Gryschuk, Paul	54,993	Harrison, Scott	67,345
Glettler, Marlene	64,266	Guenther, Sharon	57,405	Harrison, Terry	50,848
Glines, Gail	50,502	Guenther, Zonia	55,587	Hart, Heidi	50,364
Globa, Maryann	77,314	Guerra, Fernando	71,937	Hartley, Karen	65,393
Gmerek, Renita	57,693	Guerrero Oneil, Marielena	66,710	Hartley, Laurie An	73,403
Goertzen, Florence	71,930	Guest, Tamara	57,779	Hartley, Teresa	62,729
Goetz, Anthony	60,150	Guillemin, Jo Anne	66,870	Hartman, Maria	58,607
Gogal, Shannon	53,106	Gulle, Veronica	57,780	Hartness, Collin	78,971
Gokavi, Christina	64,996	Gummeson, Maryellen	73,202	Hartney, John	81,158
Golding Guest, Leanne	50,971	Gunn, Gerald	70,319	Hartwell, Randi	53,572
Goldstone, Shannon	64,815	Guraluk, Sheila	87,938	Harty, Carolyn	67,214
Golem, George	73,253	Gurskey, Connie	59,590	Harvey, Ella	68,616
Golubovic, Dragan	120,999	Gurski, Penny	58,081	Hashem, Shannon	50,321
Goodbrand, Ivy	66,643	Gustafson, Wanda	57,218	Hassan Youssef, Mohamed	194,422
Goodtrack, Jacquelin	58,555	Gutwin, Kim	69,229	Haukaas, Barry	68,597
Gordon, Lori	51,459	Gwilliam, Rosella	80,725	Hauser, Jeff	63,270
Gorin, Valerie	67,525	Haaland, Daylin	57,312	Hauser, Kara	65,619
Gornill, Faye	57,547	Haas, Erin	65,508	Hawco, Nicole	64,468
Gotchia, Guylaine	120,698	Hack, Katherine	57,345	Hawes, Cynthia	58,296
Gottselig, Anita	61,611	Hack, Tracy	50,841	Hawkins, Cynthia	67,725

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Hawkins, Pamela	\$ 51,736	Hiebert, Brenda	\$ 69,133	Hopkin, Erin	\$ 60,142
Haydalo, Elwood	72,484	Hiebert, Katie	57,381	Hopkins, Anna	58,769
Hayes, Margaret	92,527	Hiebert, Orrey	75,453	Hopson, Heather	54,337
Hayes, Penny	62,949	Hibner, Linda	61,910	Horbach, William	155,976
Haynes, Jennie	50,848	Hildebrand, Teresa	64,559	Hordyk, Elisa	60,041
Hazen, Michelle	66,270	Hilderman, Judy	54,990	Horejda, Natalie	64,641
Head, Helen	66,791	Hildred, Colin	75,276	Horne, Iris	55,349
Heaney, Celeste	78,508	Hill, Donna	50,573	Horse, Lucille	52,276
Heathcote, Debra	63,442	Hill, Joanne	87,999	Horsman, Barbara	53,958
Heathcote, Jon	72,508	Hill, Keith	57,080	Horsman, Paulette	117,989
Hedlund, Dave	115,468	Hill, Micheal	62,659	Horton, Christine	78,469
Heebner, David	95,853	Hill, Sandra	66,197	Horvath, Joyce	63,720
Heenan, Donald	56,277	Hillier, Justin	76,181	Horvath, Lois	75,741
Hegedus, Beverley	63,816	Hillyard, Leonard	60,438	Horvey, Lisa	66,103
Heiberg, Melody	63,004	Hilts, Debra	50,844	Hosaluk, Suzanne	80,020
Heimlick, Leanne	59,330	Hipfner, Carol	58,910	Hotchen, Marlene	68,128
Hein, Andrea	50,584	Hitchcock, Edward	61,025	Hough, Jan	64,851
Hein, Carol	85,809	Hitchcock, Trudy	91,874	Hoult, Donna	63,454
Hein, Colin	73,206	Hladun, Deanna	90,772	Hovind, Colleen	54,788
Hein, Shannon	53,522	Hnidek Wilson, Lydia	71,257	Howat, Henriette	79,694
Heinrichs, Menno	81,389	Hobbins, Melanie	54,102	Howden, Janice	66,516
Heisler, Doreen	56,965	Hockley, Elaine	72,836	Howell, Lorna	63,409
Heller, Wendy	51,891	Hodges, Rachel	63,292	Howie, Douglas	80,351
Hembroff, Barbara	60,653	Hodgson, Barbara	68,811	Hrynowsky, Denise	62,479
Henderson, Pat	51,682	Hodson, Dellina	61,475	Hrynowsky, Sheldon	66,435
Henderson, Penny	62,373	Hodson, Paul	74,790	Huber, Charlene	52,240
Hendrickson, Brenda	91,221	Hoeflicher, Jean	54,931	Huber, Kristyn	64,015
Henneberg, Patricia	58,997	Hoelt, Marie	63,320	Huber, Sharon	71,023
Hennie, Debra	72,736	Hofer, Sandra	63,349	Hubich, Fran	65,657
Hennink, Maurice	223,055	Hoff, Judy	83,445	Hubich, Kathy	52,170
Henry, Doris	68,263	Hoffart, Jan	58,653	Hubick, Jackie	65,430
Henry, Jennifer	90,054	Hoffarth, Kristin	57,355	Hubick, Murray	86,391
Hepworth, Shelley	56,841	Hoffman, Shelley	78,516	Huck, Miranda	54,972
Herasymuk, Elaine	76,937	Hoffmeyer, Anette	67,342	Hudec Schweiger, Peggy	73,479
Herauf, Cindy	50,605	Hogg, Sarah	98,836	Hudell, Melinda	77,083
Herauf, Reesha	57,356	Hogg, Shawna	61,447	Hudson, Dena	53,009
Herbert, Tamara	57,368	Holden, Amy	61,013	Huebner, Sheryl	51,933
Herbison, Sherry	67,866	Holden, Kathryn	65,713	Huel, Jeannette	55,096
Herchuk Norris, Lorie	59,452	Holfeld, Sandra	61,444	Huel, Lynda	54,414
Herczakowski, Leanne	54,677	Holland, Karilee	54,134	Hueser, Mary Ann	68,822
Herda, Christine	54,480	Holliday, Sharon	69,561	Huffman, Shanna	60,918
Herman, Jacquelin	63,923	Hollinger, Colleen	65,214	Hugel, Eugene	74,187
Hern, Diane	51,129	Hollinger, Phyllis	56,033	Hughes, Patricia	56,424
Hernando, Jessica	64,254	Hollinger, Wanda	55,706	Hughes, Robin	216,126
Herod, Corey	70,703	Hollis, Ruth	55,837	Hui, Bosco	74,781
Herod, Elizabeth	58,912	Holmes, Lisa	50,287	Hungle, Christine	64,728
Heroux, Martin	209,841	Holmes, Marcia	67,657	Hunko, Valerie	96,335
Herperger, Kristy	52,172	Holmstrom, Carol	54,673	Hunt, Stacy	69,190
Herr, Greg	60,846	Holness, Kandace	59,297	Hunter, Della	83,860
Herzog, Sharla	56,799	Holt, Shawna	59,224	Hunter, Nancy	68,479
Hewitt Creek, Gabrielle	65,313	Holt, Teresa	59,489	Hunter, Susan	86,509
Hewitt, Lisa	55,192	Homes, Brenda	55,068	Huntley, Donna	74,017
Hextall, Denise	55,161	Homes, Wendy	66,691	Husak, Margaret	60,452
Heywood, Danae	55,792	Hominuke, Shari	64,767	Husum, Cheryl	57,649
Hicke, Janice	69,911	Hooker, Cara	69,006	Hutchings Besse, Janice	94,339
Hickey, Jacquelin	74,258	Hooker, Paula	56,554	Hutchinson, Marian	123,393
Hickie, Laurie	73,418	Hooper, Vivian	55,479	Hutchinson, Shirley	59,360
Hicks, Tara	64,366	Hopfauf, Lori	78,508	Hutt, Amy	64,984

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Huys, Deborah	\$ 77,249	Johnston, Lorraine	\$ 66,959	Kennedy, Trena	\$ 58,393
Hydamacka, Corrine	62,817	Joice, Robert	50,762	Keulen, Lynn	74,245
Hyer, Jeanne	56,056	Jolly, Shannon	58,199	Keyowski, Terrance	81,891
Iannetta, Victoria	61,654	Jones, Edward	418,308	Keyowski, Theresa	68,828
Ikert, Debra	54,439	Jones, Karen	77,931	Khalifa, Amer	411,960
Ingham, Darren	73,582	Jones, Keri Lyn	52,625	Khan, Bibi	118,075
Ingham, Dianna	64,943	Jones, Sandra	64,550	Kinaschuk, Karen	66,140
Ingleby, Joanna	65,304	Jonsson, Meranne	64,286	King, Garry	96,644
Ingram, Jennifer	76,372	Jordens, Jaime	64,003	King, Tammy	50,471
Ingram, Lynne	68,222	Jordens, Sheila	68,450	Kinneberg, Lorie	67,013
Innes, Heather	74,894	Jordheim, Gerald	57,912	Kinney, Patricia	76,811
Irvine, Erin	75,197	Jors, Roberta	66,521	Kinney, Wendy	100,676
Isaac, Michelle	72,464	Joseph, Roy	74,444	Kinwig, Valerie	59,594
Isaak, Joan	75,041	Jumaga, Evelyn	74,762	Kirby, Angus	369,640
Issel, Brenda	62,789	Kach, Deborah	68,476	Kirby, Joanne	71,650
Issel, Curtis	66,106	Kachaluba, Tamara	69,225	Kirby, Lois	66,476
Isted, Cheryl	54,207	Kaedan, Annette	64,068	Kirkpatrick, Wendy	50,602
Ivanochko, Elizabeth	94,858	Kaip, Steven	58,362	Kirsch, Joyce	90,169
Iverson, Paul	68,567	Kalapesi, Zarin	358,624	Kisilowski, Mary	67,580
Ives, Roger	59,633	Kanciruk, Pamela	76,175	Kissel, Kevin	56,530
Jackiw, Susan	78,508	Kane, Kyra	60,461	Kitchen, Brent	87,449
Jackson, Alysia	64,462	Kapell, William	53,889	Kitz, Natasha	52,056
Jackson, Donna	68,110	Karapita, William	58,917	Klassen, Carol	147,883
Jackson, Jeffery	61,428	Kardynal, Ben	82,744	Klassen, Cassandra	61,940
Jackson, Joy	78,746	Karkulowski, Maryann	55,753	Klassen, Nadine	65,346
Jackson, Linda	68,280	Karr, Theresa	51,965	Klassen, Peggy	63,481
Jackson, Marlene	58,431	Karunakaran, Kumudhini	121,933	Klatt, Shayleen	60,076
Jackson, Shannon	88,703	Karza, Phil	76,742	Klebeck, Deana	78,419
Jacobs, Dawn	58,310	Kasbrick, Ashley	55,592	Klein, Carl	80,436
Jacobson, Pat	59,361	Kashmere, Dianne	62,876	Klein, Carrollynn	84,801
Jacobson, Shelley	66,837	Katchuck, Connie	61,840	Klein, John	70,594
Jalloh, Bashir	56,838	Katchuck, Jennifer	63,245	Klein, Lana	79,603
Jamroziak, Jerzyk	55,479	Katchuk, Dennis	60,096	Klein, Lori Lynn	68,794
Jaster, Brian	63,443	Kathol, Lorna	75,602	Klein, Tom	90,987
Jaworski, Brenda	50,344	Kattler, Andrea	63,053	Klempner, Dianne	61,395
Jeannot, Sharon	50,443	Katzberg, Blaine	79,453	Kletchko, Joanne	64,807
Jennett, Steven	63,939	Katzberg, Kimberly	62,127	Klevgaard, Linda	50,856
Jensen, Chris	75,625	Kauk, Dianne	56,641	Klimek, Gail	73,227
Jensen, Karen	58,153	Kaytor, Jeanette	62,728	Klisowsky, Allan	56,788
Jeske, Beverly	69,231	Kaytor, Jill	63,281	Klock, Lori	50,445
Jeske, Winona	66,230	Kaytor, Rae	79,088	Klotz, Kathy	54,604
Johannson, Kevin	65,872	Keenan Arp, Cathy	79,231	Klotz, Steven	78,941
Johns, Kirby	89,431	Keenan, Louise	115,504	Kluk, Debra	69,272
Johnson, Brenda	74,023	Keep, Sandra	58,897	Kluk, Dennis	80,545
Johnson, Debra	51,959	Keith, Ellen	71,246	Klyne, Barbara	52,830
Johnson, Janis	82,288	Keleman, Darlene	62,657	Klyne, Joseph	50,106
Johnson, Jeannette	66,797	Keller, Leigh	74,363	Klyne, Nadean	61,588
Johnson, Julie	67,866	Kellington, Beverly	78,582	Knapman, Jamie	63,231
Johnson, June	51,145	Kellington, Grenda	67,362	Knapp, Randall	110,156
Johnson, Krista	55,161	Kelin, Cheryl	58,397	Knibbs, Richard	63,354
Johnson, Laurie	73,207	Kelly, Bette	59,871	Knoll, Theresa	51,144
Johnson, Pamela	62,151	Kelly, Tiffany	55,333	Knowles, Elizabeth	55,678
Johnson, Patti	63,612	Kemp, Michelle	66,836	Knox, Jamie	51,357
Johnson, Penelope	59,917	Kempton, Brian	62,685	Koch, Paula	52,206
Johnson, Sherry	66,107	Kendrick, Susan	67,018	Koch, Shannon	58,562
Johnson, Vaughn	99,858	Kennedy, Leigh	81,576	Koffler Hubbs, Loralyn	98,448
Johnston, Heather	71,844	Kennedy, Liana	63,634	Kohl, Dan	98,590
Johnston, Jolene	64,051	Kennedy, Rachel	57,413	Kohm, Karen	63,726

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Kolach, Danielle	\$ 56,152	Kurucz, Rhonda	\$ 59,967	Legault, Cheryl	\$ 53,003
Kolb, Lavonne	66,928	Kuzma, Bettyann	53,845	Legault, Dana	67,357
Kolls, Lorna	63,511	Kwan, Davin	66,659	Legault, Lydia	84,432
Koltun, Margaret	88,334	Kydd, Jason	65,817	Leggott, Michelle	58,399
Kopelchuk, Leah	60,151	Kyle, Catherine	66,849	Lehr, Craig	60,957
Korchinski, Jaime	88,035	Kyrylchuk, Sharon	53,102	Lehr, Ellen	59,506
Koronkiewicz, Carol	53,955	Labatt, John	71,085	Leibel, Florence	58,474
Kosabek, Debbie	78,508	Labelle, Esther	67,166	Leibel, Greg	90,694
Kosar, Deloris	71,472	Lacroix, Lori	63,893	Leier, Barbara	67,224
Kosar, Tammy	55,874	Lafayette, Esther	74,464	Leier, Owen	69,349
Koshman, Dalynne	62,138	Lafleur, Lisa	68,159	Leier, Rose	67,573
Kostiuk, Cheryl	71,912	Lakhdari, Mohammed	61,297	Leier, Toulakone	81,297
Kostiuk, Laurie	51,933	Lamarche, Shawn	64,844	Leigh, Ada Mary	64,065
Kot, Nancy	67,776	Lamb, Patricia	67,830	Lein, Diana	51,330
Kot, Pamela	65,812	Lamers, Dana	51,533	Leippi, Dawn	63,589
Kotowich, Richard	63,329	Landry, Timothy	85,796	Leitch, Linda	59,910
Kotrla, Allison	60,160	Lang, Bruce	76,356	Leko, Carmen	55,525
Kotylak, Rhonda	69,751	Lang, Edith	67,233	Lemoine, Julie	64,383
Koutsoulis, George	71,788	Lang, Kelly	63,872	Lemon, Diane	74,017
Kozack, Katherine	85,628	Lang, Michael	72,381	Len, Dennis	78,712
Kozak, Bill	55,832	Lange, Simon	70,948	Len, Rheanna	53,149
Kozak, Jodie	55,881	Langevin, Monica	63,848	Leonard, Ellie	70,115
Kozak, Lori	71,242	Langford, Judy	68,385	Leonard, Shauna	70,910
Kozak, Susan	59,486	Langford, Karen	69,112	Lerand, Kasandra	72,661
Kozak, Tammy	66,435	Langstaff, Joan	67,296	Lerner, Diana	69,008
Kozakewich, Carol	58,301	Lanz, Lavny	96,560	Leroux, Judy	62,669
Kozakewycz, Diane	93,486	Laplan, Dora	51,305	Leruyet, Charmayne	72,439
Kraemer, Diana	75,833	Larden, Ross	58,153	Lesko, Sandra	60,443
Kraetzig, Maria	81,236	Larkin, Colleen	56,679	Letain, Rae Lynn	83,283
Kraft, Sherry	76,724	Larmour, Brent	52,795	Letang, Arlis	92,700
Krahenbil, Elizabeth	64,290	Larrivee, Diane	148,309	Leduc, Loralyn	51,742
Krahn, Kathy	82,017	Larsen, Derrick	97,427	Levasseur, Eyke	68,605
Krahn, Sharon	66,888	Larsen, Judy	76,000	Leverick, Gordon	66,657
Kramer, Joanne	69,837	Larsen, Pamela	74,151	Leverington, Jessica	61,540
Kramer, Nancy	80,307	Larson Olmstead, Arinda	80,661	Levesque, Linda	76,758
Krause, Catherine	64,587	Larson, Laureen	90,186	Levesque, Michelle	62,534
Kraushar, Larry	73,348	Latimer, Wanda	59,820	Lewicki, Laura	63,816
Kreis, Debbie	69,796	Latoski, Katherine	71,510	Lewis, Bernice	78,540
Kreke, Doris	66,167	Latoski, Patricia	72,336	Lewis, Carol	57,983
Krenz, Trudy	52,726	Lauagan, Milagros	68,611	Lewis, Daniel	82,327
Kreshewski, Nathalie	51,468	Lauman Hartmier, Barbara	66,177	Lewis, Katherine	50,708
Kress, Dorena	66,338	Laursen, Brian	176,773	Li, Yali	60,028
Krieger, Laureen	66,860	Lawrence, Monica	77,616	Liebold, Gloria	53,028
Kristoff, Anna	66,986	Lawrence, Robin	66,286	Lindemann, Debi	57,084
Krogsgaard, Lorraine	51,749	Lawson, John	70,155	Lindsay, Rae	72,287
Krogsgaard, Susanne	70,342	Layne, Bob	97,017	Lindskog, Nicole	68,743
Krohn, Sheila	75,518	Layton, Jennifer	52,681	Lindstrom, Jane	155,157
Krysak, Kathleen	68,047	Layton, Lorrie	61,585	Line, Douglas	67,866
Kubiak, Angela	67,187	Lazurko, Susan	62,339	Lionetti, Donna	68,997
Kuderewko, Wendy	63,084	Lebruno, Patricia	68,165	Lipon, Marlene	57,553
Kuhtz, Tracy	82,116	Lebruno, Roger	72,368	Lippai, Jennifer	58,484
Kula, Alicia	118,847	Lechinsky, Debbie	62,834	Litzenberger, Angela	52,192
Kummer, Susan	59,934	Lee, Angeline	104,064	Litzenberger, Kathryn	51,672
Kuntz, Agatha	59,589	Lee, Maureen	63,668	Litzenberger, Laura	60,161
Kuntz, Donald	79,671	Lee, Patricia	63,307	Livingston, Crystal	58,135
Kuntz, Lynn	63,224	Leech, Kathy	50,097	Livingstone, Dustin	52,023
Kurenoff, Joanne	73,398	Leech, Lanna	76,671	Llarena, Melanie	97,573
Kurtz, Linda	62,690	Legault Wilson, Dionne	76,805	Lloyd, Dorothy	63,765

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Lloyd, Kathleen	\$ 74,385	MacMillan, Carolyn	\$ 65,084	Martin, Lillian	\$ 62,113
Lochbaum, Roberta	72,325	MacMillan, Leanne	63,667	Martin, Marc	59,332
Lockeridge, Keith	60,699	MacMillan, Robert	77,831	Martin, Neoma	62,666
Lockert, Elizabeth	75,255	MacMillan, Ryan	54,571	Martin, Sheila	53,074
Lockert, Lori	74,746	MacNamara, Jean	63,562	Martin, Shirley	67,674
Loffler, Janice	64,342	MacPhee, Linda	69,407	Marynick, Marlin	67,717
Logan, Edna	58,153	MacPherson, M Janice	59,916	Mason, Jeff	50,474
Lolacher, Susan	68,110	MacPherson, Roxanne	56,233	Mason, Linda	91,692
Lomenda, Janice	53,930	MacTavish, James	73,147	Massier, Candice	68,256
Lonethunder, Vivian	54,823	Mader, Darlene	77,861	Massine, Darlene	61,842
Longman, Wendy	69,967	Madriños, Estefania	69,670	Masters Guest, Renee	62,154
Lorencz, Taryn	55,806	Magnaye, Za	52,646	Masters, John	88,149
Lorenz, Anita	55,288	Magnuson, Maureen	70,132	Masters, Sandra	58,253
Lough, Maureen	73,188	Magotiaux, D Arcy	95,475	Matheis, Jacob	55,050
Louis, Debbie	55,901	Mah, Jeffrey	65,214	Mathie, Linda	61,139
Lourens, Michelle	53,442	Mahoney, Patricia	62,405	Matt, Sonja	99,293
Lourie Mackenzie, Cathy	57,316	Mahovsky, Larry D	69,242	Matties, Debbie	65,726
Low, Ken	79,098	Maier, Janet	68,467	Matwiy, Jacqueline	60,146
Low, Margot	67,059	Makelki, Catherine	93,745	Matz, Ursula	56,081
Lowenberg, Candace	71,445	Makie, Catherine	69,350	Maupin, Karen	115,599
Lowey, Jana	63,685	Maksymew, Sharon	69,962	Maurer, Nancy	54,670
Lowey, Judith	62,702	Malach, Shirley	65,840	Maw, Lester	63,013
Lu, Xiaoping	63,814	Malang, Edwin	81,432	Mayer, Deborah	54,722
Lucero, Dranreb	73,794	Malang, Marissa	64,950	Mayer, Megan	55,095
Lucero, Jocelyn	50,437	Malegus, Ken	63,552	Mayes, Stan	52,917
Luciak, Ken	90,276	Mali, Bahera	279,847	Maynes, Julie	69,416
Luciuk, Leann	58,175	Malinowski, Eleanor	68,285	Mazur, Janelle	68,199
Luff, Pat	53,911	Mallory, Joanne	80,164	Mazur, Janet	83,923
Lukey, Patrick	90,681	Maloughney Herbe, Patricia	61,537	Mazur, Mark	95,446
Lund, Starla	66,604			Mazuren, Dixie	64,400
Lunde, Kenda	62,272	Mamchur, Grant	97,225	McAleese, Roberta	52,148
Lundeen, Coleen	67,668	Manalo, Lulu	60,698	McAllister, Kathleen	56,464
Lundy, Debbie	79,340	Manchester, Samantha	73,671	McAuley, Valerie	67,709
Lunnin, Lori	60,521	Mancuso, Debra	98,480	McAvoy, Erin	58,615
Lusk, Valerie	97,358	Mann, Doug	60,211	McBride, Jessica	53,388
Luterbach, Colleen	78,635	Mann, Joan	57,091	McCabe, Debra	71,812
Luther, Jeanette	68,758	Mann, Suba	177,368	McCall, Elizabeth	65,554
Lynch, Brant	59,442	Mann, Teri	70,466	McCann, Linda	83,696
Lynch, Tera	58,233	Mantyka Whitford, Elaine	69,454	McCann, Michael	67,595
Lynn, Sandra	61,040	Manz, Joanne	68,398	McCann, Nancy	74,477
Maas, Allison	82,829	Marce, Michelle	58,626	McCann, Orinda	63,687
Mabee, Sonja	65,738	Marchant, Karla	59,415	McCaw, Dianne	63,233
Macauley, Katherine	52,999	Marcil, Allison	70,676	McCaw, Mitsy	64,963
Macausland Berg, Dianne	63,528	Marin, Donna	51,051	McClement, Sam	63,814
MacDonald, Alison	71,872	Marissen, Debby	75,566	McConnell, Denise	78,852
MacDonald, Jill	54,166	Markle, Tracy	59,619	McConnell, Susan	59,312
MacDonald, Scott	61,467	Markwart, Carol	63,053	McCorriston, Sheri	60,082
MacDonald, Viola	53,685	Markwart, Corinne	77,625	McCrea, Raymond	55,066
Mack, Ellen	64,408	Markwart, Lori	54,829	McCrystal, Doreen	50,387
MacKay, Cheryl	55,584	Marsh, Maureen	90,304	McCurry, Terryann	73,527
MacKenzie, Bonnie	75,187	Marshall, Cindy	62,449	McDermaid, Karen	89,597
MacKenzie, Karen	81,728	Marshall, Dean	92,272	McDermitt, Tamara	64,428
Macey, Denise	70,028	Marshall, Doris	77,470	McDonald, Elizabeth	64,970
Macknak, Brenda	51,369	Marshall, Joan L	58,162	McDonald, Jayne	68,851
Macknak, Errin	60,213	Martens, Morgan	62,542	McDonald, Patricia	64,608
MacLennan, Deborah	81,733	Martin, Arlene	50,874	McDonald, Paulette	70,724
MacLennan, Lorne	60,159	Martin, Donalee	62,071	McDonald, Rhonda	82,032
MacMillan Tyson, Jamie	52,149	Martin, Donna	71,783	McDonald, Sandra	52,910

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
McDougall, Elizabeth	\$ 61,635	Merriam, Debbie	\$ 56,112	Morrison, Sandra	\$ 67,111
McEwen, Shelly	55,871	Merritt, Valerie	90,472	Mosewich, Cindy	80,694
McGeough, Lorie	82,254	Mesfin, Rediate	51,070	Moskal, Penny	58,302
McGifford, Delores	60,873	Metheral, Shay	51,758	Moyer, Gordon	58,393
McGill, Nancy	81,708	Meyer, Abraham	286,090	Mpundu, Regina	72,800
McGillicky, Sidney	58,188	Michayluk, Gordon	91,898	Mroske, Lisa	54,756
McGonigal, Eleanor	58,376	Michon, Gerald	54,950	Muir, Erin	62,460
McGrath, Elizabeth	73,518	Middleton, Lanna	62,252	Mulilo, Petronell	81,971
McGregor, Nikki	60,506	Mihalicz, Helen	57,061	Muller, Karen	66,228
McHardy, Darlene	77,764	Mihalicz, Linda	51,748	Mundy, Harry	56,975
McInnis, Joan	54,345	Mile, Clay	67,300	Munn, Chris	76,017
McIntaggart, Glen	62,245	Millama, Zenaida	175,013	Munns, Tiffany	64,586
McIntosh, Beverly	61,111	Miller, Adrienne	50,409	Munson, Russell	66,733
McIntosh, Monique	68,110	Miller, Beverly	61,456	Murdock Smith, Gloria	90,720
McKay, Darcy	90,842	Miller, Carol	69,413	Murray, Mark	83,413
McKechnie, Marlene	74,844	Miller, Charlotte	62,357	Murray, Robert	53,168
McKellar, Hector	62,028	Miller, Diane	62,994	Mutafya, Mary	90,271
McKenzie, Gerri	63,008	Miller, Heather	68,176	Mwale, Mwangala	90,340
McKenzie, Sharron	54,290	Miller, Lauren	58,418	Mwamba, Ommey	88,036
McKenzie, Virginia	53,884	Miller, Lois	58,404	Mwela, Judy	65,378
McKim, Darcy	67,034	Miller, Lois	64,763	Myles, Wanda	50,960
McKinnon, Faye	63,817	Miller, Margaret	70,275	Myrah, Michele	68,046
McKnight, Brenda	54,997	Miller, Shirley	57,969	Myren, Reta	53,050
McKnight, Tracie	58,587	Milner, Thomas	152,657	Nadiger, Cathy	74,609
McLaren, Wendy	64,230	Mintenko, Joy	84,133	Nagy, Tess	59,036
McLaughlin, Connie	75,633	Mirva, Denise	74,648	Nagy, Valda	61,258
McLaughlin, Linda	56,843	Miskiman, Todd	75,638	Nahachewsky, Desiree	67,881
McLean, Bonnie	54,737	Misskey, Eunice D	65,429	Nakrayko, Gerri	60,137
McLean, Dixon	60,554	Mitchell, Angie	61,204	Nalwamba, Rhoda	75,636
McLean, Sharon	51,616	Moeller, Michelle	52,598	Nameth, Sharon	57,912
McLean, Theresa	69,862	Mohl, Regan	60,822	Nasewich, Susanne	52,475
McLeod, Melanie	78,954	Mohr, Ann	67,778	Nasser, Roseann	67,864
McMechan, Janet	62,306	Mohr, Janet	61,262	Natyshak, Merle	76,906
McMillan, Stewart	89,599	Mokry, Michelle	66,417	Neis, Cyndi	58,981
McMorris, Donna	56,314	Molesky, Carla	66,479	Neison, Valerie	76,324
McMullen, Cathy	64,350	Molesky, Louise	81,321	Nelson, Beverly	98,772
McMullin, Scott	60,415	Mollison, Deborah	152,304	Nelson, Bonnie	58,732
McNamara, Anne	51,360	Molnar, Colleen	90,794	Nelson, Danielle	50,020
McNeil, Dawn	117,144	Molson, Bev	58,397	Nelson, Diane	69,528
McPeck, Randy	65,888	Montanini, Lorna	88,941	Nelson, Dwight	275,331
McPhee, Linda	74,841	Montague, Melissa	53,938	Nelson, Jean	63,717
McPherson, Bernadett	67,422	Monteith, Bernadett	50,984	Nelson, Joanne	55,341
McPherson, Debbie	77,555	Montenegro, Shelléy	70,915	Nelson, Jocelyn	71,038
McStay, Sharron	61,055	Monteyne, Barry	69,319	Nelson, Nadeane	61,807
McTaggart, Angela	60,628	Monteyne, Dianne	63,897	Nelson, Rhonda	59,820
McTavish, Betty	53,605	Moore, Melissa	66,131	Nerenberg, Marilyn	56,191
Meider, Monica	69,710	Moore, Michelle	58,547	Nernberg, Sheryl	66,532
Melenchuk, Mary Anne	63,937	Moore, Sheila	83,948	Neuls, Frances	87,365
Melnechenko, Jody	68,290	Morari, Brenda	78,838	Neumann, Barbara	74,431
Mensch, Tricia	66,782	Morelli, Jeffrey	66,183	Neumann, Carey	57,298
Menzies, Kelli	65,779	Moreside, Susan Ann	71,805	Neumann, Harry	67,930
Mercer, Christoph	51,081	Morgan, Randy	56,425	Neville, Susan	148,309
Mercer, Dawna	56,887	Morgan, Stuart	55,266	Newcombe, Susan	65,171
Mercer, James	63,135	Morhart, Stacey	62,281	Newton, Mae	70,709
Mercier, Maria	70,656	Morin, Judy	68,159	Ngilangil, Mercedes	56,744
Mergen, Kathleen	50,526	Morissette, Ryan	80,028	Ngoka, Grace	60,976
Merk, Lisa	57,128	Morrell, Debra	55,872	Nguyen, Cuong Duc	54,005
Merk, Michelle	62,108	Morris, Linda	52,132	Nguyen, Thuy	115,171

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Nichol Langlais, Barbara	\$ 53,559	Orthner, Gail	\$ 77,671	Paul, Michael	\$ 69,175
Nichol, Christine	58,166	Osborne, Tara	65,158	Paul, Steve	59,670
Nichol, Louise	58,605	Osei, Philomena	94,903	Paulhus, Blake	56,583
Nielsen, Doug	69,295	Osicki, Leonard	75,518	Paulhus, Gwen	67,491
Nielsen, Terry Lyn	79,478	Osiowy, Melinda	74,469	Paus, Carrie	69,402
Nieminen, Shannan	59,558	Ostafie, Judith	62,722	Paus, Victoria	58,244
Nieto, Lori	57,547	Ostafie, Neil	59,378	Pearce, Brent	57,253
Ninan, Abraham	295,261	Ostapowich, Sonia	61,733	Pearce, Rick	65,722
Ning, Lianne	70,229	Oswald, Diana	54,752	Peart, Cathy	51,269
Noels, Lori	67,020	Ott, Brigid	61,389	Pedersen, Andrew	83,197
Nolin, Colleen	71,695	Otte, Odette	65,382	Pedersen, Dawn	57,246
Nordgulen, Laura	68,283	Otten, Laurele	53,515	Pedersen, Lisa	54,152
Nordgulen, Terry	54,104	Ottenbreit, Tammy	72,847	Pederson, Lorna	77,578
Nordwick Chan, Kim	83,128	Ottoson, Cheryl	79,588	Pelat, Donna	56,060
Norick, Barbara	69,134	Overend, Dawn	67,895	Pelletier, Colette	53,899
Norman, Christoph	74,453	Oweh, James	63,877	Pelletier, Kim	58,874
Norman, Patti	64,764	Owen, Trisha	60,251	Peltier, Brenda	61,793
Norton, Deborah	67,772	Owens, Katherine	55,136	Penn, Lisa	67,116
Novak Galgan, Harriett	84,737	Ozga Bellamy, Linda	80,154	Penner, Janice	53,630
Novak, Karen	64,294	Ozga, Donald J	75,479	Penner, Lyndsay	52,192
Novak, Rhonda	54,707	Pachal, Laurelle	67,715	Peralta Elgueta, Pedro	56,526
Novik, Lori	53,145	Packman, Selena	67,898	Perchie, Glen	111,065
Noyes, Alexandra	74,451	Pador Lee, Beverly	59,445	Perkins, Jeanie	59,880
Nugent, Carol	63,142	Padwal, Jaspal	58,342	Perkins, Susan	71,114
Nugent, Karen	60,765	Padwal, Ravinder	60,843	Perras, Tracy	60,018
Nurse, Byron	66,974	Paetsch, Dale	64,372	Perrin, Jonathan	81,288
Nuttall, Janice	68,187	Paez, Catherine	63,766	Perrin, Laura	57,275
Oak, Lisa	71,011	Page, Karen	58,761	Persson, Barbara	58,338
Oakes, Larry	55,457	Paice, Trudy	51,252	Persson, Jamie	56,504
Oberndorfer, Gillian	92,039	Palandri, Sandra	58,393	Peslar, Stephen	55,707
Obrigewitsch, Carmen	65,649	Palanica, John	64,404	Peter, Tammy	55,417
Obst, Marjorie	67,958	Palazzo, Tony	57,187	Peters, Elfreda	50,641
Obyrne, Patrick	116,579	Paluck, Elan	84,720	Peters, Phyllis	76,510
Ocarroll, Tiann	200,792	Panchuk, Darlene	50,573	Peters, Wade	75,611
Ochitwa, Sandra	66,803	Panchuk, Douglas	82,969	Peterson, Kathy	61,437
Ochoa, Patricia	62,188	Pantel, Chris	60,038	Peti, Charles	186,256
O'Connor, Fiona	59,252	Pappas, Sam	67,724	Petrie, Maria	78,478
O'Connor, Grace	56,766	Paproski, Jody	62,806	Petroff, Susan	74,779
Octubre, Penafranc	82,302	Paquette, Wayne	79,079	Petrychyn, Margaret	78,499
Ofukany, Lindsey	56,477	Paquin, Joanne	62,640	Petryshen, Claudia	74,595
Ogibowski, Theresa	69,434	Parbery, Donna	62,025	Pettit, Terri	72,737
Ogilvie, Lore	76,662	Pare, Judy	68,635	Pham, Huy	90,793
Ogrodnick, Nancy	70,264	Parent, Darla	61,890	Phenix, Wendy	61,046
Okeadu, Justina	58,782	Parker, Jean	75,509	Phillipo Hugel, Paula	72,211
Olate, Marta	56,525	Parker, Robert	53,606	Phillips, Casey	54,528
Olbrich, Robert	56,527	Parley, James	59,306	Phillips, Joanne	87,319
Oliver Carson, Stacey	54,964	Parrell, Billy	52,989	Phillips, Leah	76,536
Ollinger, Karen	63,926	Parsons, Lucia	69,893	Phillips, Scott	58,573
Olson, Pamela	62,274	Partaik, Susan	86,670	Phillips, Tracy	111,220
Olson, Troy	65,060	Partridge, Erin	76,637	Pho, Joleen	54,721
Ombac, Erlinda	84,882	Parvez, Naeem	361,544	Piasta, Linda	59,575
Omoth, Barbara	74,412	Pascua, Milagros	56,893	Pidhorney, Corrinne	70,196
Onagi, Maxine	59,733	Pasezniak, Marion	124,048	Pike, Greg	63,954
Oquinn, Sheryl	69,067	Pasion, Ricarda	50,721	Pillay, Kumaravel	295,667
Orasan, Loredana	60,387	Paska, Rosalie	77,435	Pillipow, Kelvin	50,349
Orban, Dale	67,866	Paslawski, Judith	69,603	Piluschak, Brenda	53,938
Orell, Colleen	63,231	Paterson, Dineen	66,910	Pituley, Harriette	76,838
Oroz, Budimka	91,912	Patterson, Ed	103,181	Playter, Pamela	94,853

INDIVIDUAL

Plosker, Connie
 Plosz, Penny
 Poitras, Jana
 Poley, Judith
 Pollard, Sandra
 Pollock, Bonnie
 Pollock, Darlene
 Pon, Tin Yout
 Poncsak, Debbie
 Poole, Susan
 Popescu, Janet
 Popick, Paula
 Popoff, Laura
 Porter, Barbara
 Porter, Marion
 Portras, Donna
 Potetz Moore, Leeann
 Potter, Darcelle
 Potter, Douglas
 Potter, Gladys
 Potter, Ron
 Potter, Vera
 Powell, Laura
 Powell, Maureen
 Powelson, Susan
 Power, Kenda
 Powers, Marilyn
 Praski, Nancy
 Pratt, Joyce
 Preikchat, Elton
 Prekaski, Colleen
 Prevost, Debbie
 Primavera, Janice
 Pritchard, Beverly
 Procyk, Yuleeann
 Prokopetz, Jason
 Pronych, Edith
 Proudlove, Ann
 Proulx, Sharon
 Puff, Beverly
 Pugh, Myrna
 Purcell, Erin
 Purdue, Erin
 Pylatiuk, Jason
 Pylatiuk, Nicole
 Pyne, Elizabeth
 Quine, Tamara
 Quinlan, Colleen
 Quintero, Claire
 Quist, Cindy
 Racette, Andrew
 Racette, Joyce
 Racette, Yvonne
 Radford, Randall
 Radford, Trudy
 Radons, Jaymie
 Radons, Shelly
 Radtke, Chelsea
 Radutu, George

PAYMENT

\$ 53,688
 68,183
 58,872
 52,331
 67,882
 84,178
 121,426
 116,560
 65,175
 65,466
 66,396
 65,015
 67,573
 157,658
 70,995
 78,068
 62,290
 54,883
 54,289
 70,704
 69,748
 69,975
 60,080
 53,346
 79,574
 53,471
 58,006
 68,030
 70,963
 58,242
 70,227
 64,722
 63,911
 57,093
 58,384
 64,767
 61,576
 72,026
 62,490
 61,674
 64,737
 70,805
 77,567
 63,574
 57,709
 56,555
 70,433
 87,783
 61,340
 59,565
 67,905
 72,234
 63,063
 233,237
 110,609
 56,550
 70,435
 65,548
 135,986

INDIVIDUAL

Rae, Justin
 Raedeke, Maria
 Ram, Suresh
 Ramos, Lalaine
 Ramsay, Corrie
 Ramsay, Doug
 Ramsay, Todd
 Ramsdell, Cathie
 Ranalli, Greg
 Randall, Donna
 Rante, Flordeliz
 Rapchalk, Jason
 Rask, Colin
 Rathgeber, Lane
 Rathy, Brent
 Rauckman, Christina
 Rayos, Racquel
 Reaburn, Ross
 Rector, Patricia
 Reddekop, David
 Reddekop, Vonda
 Reece, Wanda
 Reed, David
 Reed, Jody
 Regehr, Ronald
 Regush, Tara
 Reichel, Judy
 Reichert, Sherri
 Reid Leimgardt, Lorna
 Reid, Donald
 Reid, Joanne
 Reid, Marilyn
 Reimer, Betty
 Reimer, Kari
 Remoue, Marcy
 Renner Scott, Faye
 Renwick, Patricia
 Renwick, Russell
 Reschke, Eric
 Resler, Jane
 Rettger, Kelly
 Revenko, Scott
 Révoy, Sheldon
 Rewerts, Lindsay
 Reynard, Beth
 Reynolds, Lorraine
 Rhodes, Rod
 Riccetto, Anabella
 Ricci, Jacquelin
 Ricci, Peter
 Rich, Kim
 Richardson, Jayne
 Richardson, Nancy
 Richaud, Pamela
 Richter, Florence
 Richter, Ginger
 Richter, Glenn
 Riemer, Joan
 Rinas, Shelly

PAYMENT

\$ 64,920
 64,552
 78,508
 62,600
 64,321
 63,445
 73,591
 66,868
 56,768
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 65,232
 82,675
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 69,959
 80,894
 59,117
 70,380
 55,965
 73,510
 66,524
 80,085
 82,775
 63,593
 53,416
 51,529
 55,808
 57,522
 69,654
 117,929
 78,128
 71,727
 62,011
 65,781
 105,909
 62,905
 66,275
 57,778
 68,807
 52,455

INDIVIDUAL

Rispler, Kathleen
 Ritmiller, Maryann
 Ritson, Ann
 Rittwage, Catherine
 Roberts, Garnet
 Roberts, Gennine
 Roberts, Susan
 Robertson, Marian
 Robertson, Marlene
 Robertson, Nicole
 Robins, Lynnette
 Robinson, Angela
 Robinson, Beryl
 Robinson, Brenda
 Robinson, Lorrie
 Robinson, Tom
 Robison, Brent
 Robson, Gwen
 Robson, Janice
 Roch, Tayne
 Rodger, Debbie
 Rodgers, Pamela
 Rogers, Heather
 Rogers, Renee
 Rogerson, Heather
 Rogina, Sandy
 Rohatyn, Dorothy
 Rohs, Pamela
 Roland, Lisa
 Romashenko, Sandy
 Rorbeck, Barry
 Rorbeck, Darlene
 Roske, Sheila
 Rosom, Cheryl
 Ross, Robert
 Rosseker, Gail
 Rostie, Darcy
 Roszell, Patrick
 Rotariu, Lynn
 Rotheisler, Melanie
 Rotheisler, Stephanie
 Roulston, David
 Routledge, Joy
 Rowan, Karen
 Roy, Linda
 Roy, Valerie
 Ruda, Lisa
 Ruder, Sarah
 Ruecker, Margaret
 Runge, Gail
 Rushlow, Jodi
 Rushton, Beverly
 Rusk, Kimberly
 Russell, Danette
 Russell, Myra
 Russell, Rhonda
 Russell, Theresa
 Ryan, Arla
 Ryan, Colleen

PAYMENT

\$ 53,024
 67,951
 69,496
 76,332
 61,491
 50,892
 65,177
 59,176
 62,944
 59,679
 80,505
 81,910
 52,807
 51,319
 52,417
 93,049
 54,336
 56,900
 67,441
 59,753
 75,581
 70,619
 58,203
 62,659
 64,736
 77,536
 67,949
 62,488
 61,733
 54,200
 98,114
 95,046
 54,516
 68,307
 60,053
 79,531
 74,360
 57,012
 66,073
 62,735
 59,786
 88,082
 70,485
 69,332
 52,341
 90,720
 77,922
 53,540
 65,359
 55,196
 93,111
 77,776
 81,512
 56,618
 54,391
 52,968
 75,615
 71,348
 51,779

GOVERNANCE AND TRANSPARENCY

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Ryan, Dianne	\$ 68,009	Schmidt, Shawna	\$ 72,378	Senga, Chad	\$ 71,400
Ryan, Glen	58,826	Schmidt, Traci Jo	66,206	Senhouse, Nathalie	91,100
Ryan, Gloria	54,446	Schneider, Carolyn	63,657	Seno, Rommel	416,932
Ryan, Warren	55,491	Schneider, Dorgen	62,856	Seon Mccallum, Charlene	65,563
Rybchuk, Ken	58,384	Schneider, Susan	53,052	Serediak, Ernie	78,563
Rydzik, Louise	116,421	Schoenhofen, Brenda	73,725	Serrano, Adriana	65,108
Rydzik, Lynne	62,301	Schoenrock, Coralee	68,110	Severson, David	62,107
Safnuk, Margaret	53,698	Schoenroth, Susan	82,672	Shannon, Rhonda	54,119
Safnuk, Tania	75,934	Schoenthaler, Shelley	60,960	Shasko, Diane	66,362
Saint, Sherry	97,804	Schonhoffer, Maurice	59,521	Shaw, Terrence	51,279
Sali, Clarence	73,573	Schopf, Jackie	59,990	Shay, Debbie	79,195
Sali, Janet	63,486	Schroeder, Carmen	63,397	Shenner, Robyn	61,956
Salmon, Leah	64,439	Schroeder, Debbie	65,303	Shepherd, Audrey	54,647
Samchyk, Stephen	53,677	Schuba, Elizabeth	80,600	Sherling, Katherine	67,736
Samonte, Nolita	53,549	Schuba, Robert C	77,917	Shevalier, Marcel	59,391
Sanden, Joel	53,794	Schöler, Sharon	60,178	Shevchuk, Debra	108,685
Sanden, Tracy	52,116	Schulhauser, Michael	63,020	Shewchuk, Daryl	99,122
Sanders, Carol Ann	67,097	Schultz, Beverley	58,381	Shields, Cathy	60,099
Sandin, Sherri	61,362	Schulz, Greg	78,496	Shier, Marlene	94,907
Sandor, Donna	73,203	Schussler, Carol	63,619	Shoemaker, Laura	54,315
Sandstra, Shawwna	64,645	Schuster, Brenda	84,612	Short, Pat	65,492
Santos, Dulce	55,661	Schutz, Monica	63,032	Shreeves, Lora	60,935
Santos, Edna	58,394	Schwalm, Dwayne	91,818	Shuflita Kurtz, Sheila	87,292
Sanya, Lynn	52,339	Schweiger, Sandy	65,837	Shymkiw, Joanne	58,472
Sarma, Debasish	62,592	Schwentke, Kathleen	58,124	Sich, Colleen	69,981
Sarty, Cathy	60,804	Scott, Marcia	90,746	Sidebottom, Sarah	64,918
Sauve, Melinda	70,414	Scott, Maxine	67,194	Sideen, Tina	53,045
Sawchuk, Dusten	76,172	Scott, Stefanie	57,909	Sidhu, Mohinder	73,544
Sawyer, Valerie	57,732	Scott, Verna	462,224	Sieben, Lianne	73,315
Schaefer, Shelley	75,137	Scraper, Kelly	63,668	Siebert, Howard	51,272
Schalk, Yvonne	50,508	Scrivens, Marlene	69,742	Siever, Sean	54,552
Schatz, Lois	70,888	Sebastian, Lydia	66,595	Silverson, Elsa	66,407
Scheibel, Jim	57,514	Secuur, Janine	57,305	Silzer, Joanne	74,926
Scheibel, Michelle	65,335	Sedlovitch, Rose	55,550	Silzer, Shanna	68,510
Scheidt, Coby	76,671	Sehn, Randy	78,508	Sim, Carey	86,549
Schell, Cindy	65,200	Seib, Chad	61,928	Simard, Linda	65,541
Schell, Eloise	90,717	Seib, Heather	69,223	Simonson, Tammy	50,574
Schellenberg, Deborah	50,195	Seibel, Jackie	60,604	Simpson, Therese	60,312
Schellhorn, Colin	60,051	Seidler, Janelle	60,804	Sinclair, Bettyanne	65,760
Schellhorn, Patricia	62,884	Seiferling, Joetta	171,293	Sinclair, Heather	55,004
Scherbey, Terry	76,160	Seivewright, Rosalie	57,001	Singer, Gennifer	51,946
Scheske, Jill	54,309	Selinger, Darcie	51,947	Singer, Kateri	73,988
Scheuer, Gail	76,110	Selinger, Donna	66,258	Singh, Melanie	52,949
Schiazza, Guido	65,376	Selinger, Elaine	58,393	Sinnett, Debbie	78,507
Schick, Elizabeth	121,125	Selinger, Janelle	59,544	Sirois, Lisa	59,797
Schier, Rae	67,866	Selinger, Lorna	71,057	Sirup, Blair	84,169
Schiller, Betty	59,896	Selinger, Michelle	63,588	Siver, Cathy	86,017
Schiltz, Murray	53,613	Selinger, Norman	59,790	Siwik, Angie	59,542
Schindel, Sherice	86,537	Selinger, Stephen	72,328	Skamanis, Val	58,590
Schlamp, Gwendolyn	60,927	Sellers, Nancy	76,140	Skinner, Shannon	56,301
Schmeling, Lenore	66,198	Sellinger, Cheryl	55,963	Skwark, Gail	64,413
Schmidt, Craig	79,015	Sellinger, Douglas	96,474	Skwark, Holly	80,216
Schmidt, Deborah	50,104	Selzer, Sharon	67,307	Slastukin, Robert	81,322
Schmidt, Laurie	52,129	Semchuk, William	109,557	Slater, Bettyann	80,965
Schmidt, Mary	57,578	Semesock, Jeanette	50,693	Slater, James	105,422
Schmidt, Mary	64,131	Senft, Janell	75,691	Slimmon, Arlene	50,150
Schmidt, Rachelle	52,322	Senft, Richard	53,743	Slingsby, Amy	65,201
Schmidt, Renee	58,510	Senga, Carrie	60,416	Slinn, Jackie	64,877

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Sinn, Jeffrey	\$ 53,889	Stadnyk, Rena	\$ 60,059	Subramanyam, Poornima	\$ 186,437
Sinn, Tanya	73,484	Stadnyk, Robert	65,816	Sulymka, Mark	83,546
Sloboda, Celeste	68,804	Stadnyk, Shelley	53,919	Sulz, Linda	104,378
Slopek, Alexandra	78,260	Stadnyk, Tyler	77,159	Sundar, Ishaan	50,133
Slopiniski, Dwayne	64,972	Stainbrook, Rhonda	67,846	Sundin, Leslie	73,037
Slotsve, Linda	67,444	Stamm, Shelley	69,344	Surkan, John	70,741
Slugoski, Yvonne	68,275	Stang, Laurel	64,287	Sutherland, William J	59,882
Sluser, Joy	57,912	Stang, Patrick	51,500	Svendsen, Alissa	69,004
Smales, Alexis	57,997	Stapleton, Tammy	69,579	Swab, Elden	65,752
Smeets, Donna	72,251	Stark, Elissa Le	61,569	Sweatman, Elizabeth	52,271
Smeikle, Lenieve	71,099	Stasiak, Catherine	62,822	Sweeney, Lesley	67,403
Smelt, Brenda	70,097	Stasiuk, Carolyn	64,012	Sweet, Tim	67,250
Smith, Amy	52,005	Stauber, Noreen	68,483	Swift, Laurie	54,111
Smith, Barbara	76,346	Steffensen, Kenneth	69,752	Switzer, Jeanette	58,656
Smith, Debbie	105,392	Stelter, Heather	56,675	Szafron, Marita	63,683
Smith, Elaine	79,155	Stengler, Marie	69,050	Szafron, Susan	53,399
Smith, Emily	57,118	Stenson, Wayne	53,845	Szakacs, Ronald	106,449
Smith, Malinda	69,876	Stepaniuk, Diane	60,571	Szmutko, Diane	86,715
Smith, Marilyn	63,504	Stephens, Dave	76,663	Szmutko, Elsie	76,068
Smith, Scott	82,351	Stephens, Wanda	71,088	Tait, Victoria	55,998
Smith, Sheila	151,975	Stephenson, Robert	73,257	Tallon, Michael	65,504
Smith, Sherice	101,394	Sterling, Darlene	60,374	Tameling, Krista	53,345
Smulan, Carole	57,297	Stettner, Laura	102,564	Tancrede, Lionel	56,870
Snedker, Cyndy	66,828	Stettner, Robin	64,126	Tangjerd, Angela	80,870
Snell, Moni	78,127	Stevenson, Andrea	50,546	Tanzell, Darren	69,237
Snell, Richard	72,726	Stevenson, Diane	74,593	Tardif, Sandra	67,130
Snook, Charlene	56,814	Stevenson, Megan	66,292	Tarr, Jonathan	59,207
Snowdy, Heather	63,802	Stewart, Cheryl	89,833	Tayco, Ailyn	56,108
Snowdy, Larry	66,773	Stewart, Linda	67,098	Tayco, Vilsilyn	63,678
Socket, Ingrid	63,569	Stewart, Lisa	88,125	Taylor, Janet	62,777
Softley, Laura	56,172	Stewart, Pat	84,811	Taylor, Jennifer	73,100
Sojwal, Anita	68,134	Stimpson, Valerie	72,201	Taylor, Ron	186,277
Solidarios, Glenn	90,614	Stinson, Brenda	60,427	Taylor, Shelley	65,252
Soloduk, Louella	90,409	Stirr, Fred	84,206	Taylor, Tami	55,937
Solypa, Cyndy	70,655	Stirr, Janice	68,110	Teale, Tracey	54,932
Sonntag, Maureen	58,413	Stobbs, Janice	69,170	Tebbs, Noeleen	54,019
Soparlo, Laura	82,566	Stocks, Ruth	51,114	Teetaert, Janaya	63,056
Sopczak, Vince	62,723	Stolz, Celine	63,505	Tejszerski, Judith M	63,582
Sorensen, Elizabeth	66,783	Stoppler, Helen	58,418	Temrick, Therese	70,311
Soria, Nonita	62,342	Storey, Katherine	68,011	Terrill, Megan	65,278
Soutar, Tania	52,397	Storozuk, Lynda	61,106	Thain, Linda	78,060
South, Sherry	60,507	Strain, Lorraine	57,405	Thauberger, Lorna	59,694
Spangenberg, Diane	76,076	Strand, Leslie	106,569	Thauberger, Myrna	58,632
Speers, Christie	82,616	Streifel, Larry	72,807	Thauberger, Veronica	56,288
Spelay, Elizabeth	60,259	Stremel, Bruce	102,468	Therault, Lyle	66,866
Spencer Jones, Beverly	77,687	Stremick, Elaine	54,210	Therrien, Charlotte	67,028
Spencer, Cathleen	53,395	Stricker, Barry	78,445	Therrien, Kristen	63,814
Spencer, Debra	66,945	Stricker, Lori	67,082	Thibault, Loreli	54,038
Spencer, Joyce	59,733	Striha, Janelle	53,557	Thick, Victoria	55,063
Spicer, Eva	109,354	Stringer, Connie	68,945	Thiele, Marjorie	71,374
Spilak, Cathi	67,990	Stringer, Suzanne	119,722	Thomas Cullen, Lynwen	70,459
Spurr, Mary	63,814	Strohan, Shirley	53,054	Thomas, Elizabeth	291,584
Srochenski, Darcey	67,765	Stromich, Susan	52,908	Thomas, Lynne	54,488
Srochenski, Terry	55,337	Strudwick, Amy	54,071	Thomas, Rhiannon	69,444
St Amand, Karen	69,676	Stuber, Arlene	64,320	Thompson, Beverly	64,448
St Onge, Lynn	91,392	Stueck, Colleen	68,168	Thompson, Carolyn	62,095
Stabbler, Robin	59,946	Stulberg, Shelley	58,715	Thompson, Cheryle	59,427
Stadnyk, Donna	59,429	Stuttard, Kim	63,693	Thompson, Lana	55,550

INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT	INDIVIDUAL	PAYMENT
Thompson, Pam	\$ 58,810	Uhren, Linda	\$ 67,625	Walker, Donna	\$ 64,277
Thompson, Vicki	70,429	Uhrich, Donna	80,999	Walker, Freda	73,696
Thomson, Deborah	50,285	Uhryn, Korin	61,539	Walker, Sharon	61,479
Thomson, Donna	60,335	Ulmer, Amanda	52,350	Walker, Sheryl	75,713
Thomson, Jill	59,112	Undseth, Kathy	66,943	Wall, Lorenne	54,893
Thomson, Patricia	76,408	Upshall, Donna L	73,558	Wallace, Brenden	68,756
Thornton, Georgia	74,550	Ursu, Dona	61,403	Wallman, Sharon	92,052
Thorp, Leah	68,838	Valimaki, Anna	77,635	Walraven, Margaret	51,317
Thurlow, Ronald G	58,587	Vall, Teresa	67,967	Walter, Douglas	50,574
Tiede, Bruno	78,705	Valley, Scott	70,178	Walters, Valeria	65,924
Tillson, Rachel	69,624	Valmeo, Imelda	76,833	Wanner, George	67,891
Tinani, Naresh	72,978	Vanbeselaere, Donna	78,011	Wappel, Melessa	58,730
Tippe, Cathy	78,669	Vanbuekenhout, Guy	90,466	Warburton, Jennifer	58,752
Tirebuck, Lois	72,169	Vancaesele, Kim	57,386	Ward, Gail	61,809
Tirk, Candace	57,372	Vandale, Joseph	50,724	Wark, Judy	53,595
Tirk, Ronald	67,830	Vandekerck, Brenda	64,526	Warnes, Robert	55,469
Tisdale, Daphne	82,506	Vandervelden, Lois	84,352	Warren, Judy	55,583
Titus, Agnes	110,990	Vandevorst, Raymond	116,188	Wasty, Fasahat	402,806
Tkach, Michele	90,619	Vanhove, Melinda	52,332	Wasylshyn, Dave	80,137
Tkatch Melle, Chrisinda	62,291	Vanluven, Dion	65,990	Waterer, Elizabeth	76,593
Toews, Audrey	69,444	Vanparys, Bev	58,757	Watkins, Michelle	63,956
Toews, Darlene	53,051	Vanvliet, Paulette	70,729	Watson, Barb	54,496
Tokarski, Annamaria	68,707	Vanwyk, Hester	105,224	Watson, Penny	68,828
Tomyk, Wendy	72,228	Varga, Devin	50,912	Watson, Tamora	74,150
Tomyn, Lana	61,056	Varga, Kristin	53,840	Waugh, Jim	65,798
Tonita, Wendy	78,374	Varga, Melissa	61,775	Wawro, Susan	67,412
Tonn, Dwight	91,163	Varin, D Brian	59,446	Webb Young, Geraldine	75,945
Toppings, Julie	77,184	Varjassy, Emily	58,407	Weber, Jill	64,085
Torbin, Ivanna	77,091	Vass, Sandra	82,086	Webster, Bernice	78,465
Torgunrud, Aldona	71,307	Vatamaniuck, Lisa	61,290	Weffen, Kerrie	58,773
Torjusen, Mark	58,099	Vegunta, Krishna	65,199	Weinberger, Annette	60,086
Toro Hopkins, Debbie	77,824	Velecky, Cynthia	63,823	Weinmaster, Marilyn	67,927
Toth, Christina	61,526	Velestuk, Debbie	68,180	Weir, Jodie	79,500
Tourond, Lorna	64,958	Venables, Natasha	61,282	Weir, Louise	85,343
Townsend, Lorraine	67,013	Venter, Jacobus	68,019	Weissbeck, Stacey	56,187
Townsend, Terri	74,788	Ventocilla, Marina	72,173	Weissbrod, Myrna	53,108
Tracey, Sherri	64,365	Verville, Francoise	69,076	Weissbrodt, Gary	66,657
Trail, Linda	72,956	Verville, Lorraine	51,141	Weisgerber, Karen	84,420
Trelenberg, Ross	59,146	Vickers, Joan	57,753	Weiss, Marjorie	55,901
Tremblay, Jade	55,473	Viczko, Krista	66,361	Weisshaar, Glenys	71,339
Trenton, Christine	64,075	Violot, Carrie	56,852	Wekerle, Robert	82,913
Trotter, Carla	68,977	Virmani, Joginder	85,952	Welder, Erin	58,319
Trotter, Joseph	64,124	Virtue, Alison	67,739	Wells, Crystal	51,371
Troy, Jennifer	70,958	Vollman, Arlyce	54,661	Welsh, Audra	61,184
Trudelle, Paulette	52,070	Vongkhaophet, Jennifer	53,984	Wentz, Maureen	65,619
Truman, Sharon	86,666	Voss, Arietta	55,281	Wentzell, Cindy	59,272
Truman, Stacy	56,584	Voss, Linda	54,787	Wesdyk, Elsie	60,284
Trytten, Melody	68,302	Vye, Lorissa	65,309	West Johnson, David	85,443
Tubello, Graziella	69,822	Wacker, Linda	90,722	West, Andrew	80,139
Tuchscherer, Laura Lee	99,568	Wade, Yvette	63,232	West, Fred	73,523
Tuff, Eileen	66,876	Wadsworth, Mary	88,890	West, Janet	60,296
Tuharsky, Ruby	72,901	Wagner, Lacy	63,540	Wharton, Tammy	72,369
Tumac, Alison	67,741	Wagner, Myrna	78,121	Whelpton, Susan	52,395
Turnbull, Dianne	72,243	Wagner, Rosemary	59,527	Whitaker, Elizabeth	57,019
Turner, Dale	64,045	Wahba, Mark	223,713	White, Barbara	65,856
Twardowski, Therese	56,667	Walchuk, Kaye	60,672	White, Gladys	58,002
Tymchyshyn, Robert	65,219	Walczkowski, Hanna	82,657	White, Kelsie	59,617
Tyrer, Diane	70,774	Wald, Irene	62,762	White, Patricia	77,352

INDIVIDUAL

Whiteman, Peter
Whiting, Celine
Whiting, Patricia
Whitley, Elizabeth
Whitrow, Rodney
Whittaker, Patricia
Wiebe, Margaret
Wiebe, Sharon
Wiest, Roberta
Wihlidal, Cara
Wilde, Edna
Wilde, Rita
Wilhelm, Tricia
Wilker, Chelsea
Wilkie, Elizabeth
Wilkie, Linda
Wilkinson, Lorna
Willerth, Kathryn
Williams, Jason
Williams, John
Williams, Linda
Williams, Marian
Williams, Patty
Williams, Wendy
Williamson, Jacquelin
Williamson, Mary
Willway, Verity
Wilmot, Jane
Wilms, Els
Wilson, Beverly
Wilson, Donald
Wilson, Donna
Wilson, Douglas
Wilson, Joyce
Wilson, Tracey
Wilton, Muriel
Windsor, Gwen
Windsor, Kent
Winkel, Tanya
Winter, Beverly
Winter, Christoph
Winton, Janet
Wirth, Donna
Wirth, Geraldine
Wirtz, Brenda
Wisniak, Debra
Witt, Raylene
Woiken, Gwen
Wolf, Lee
Wolfe, Murray
Wolfe, Robert
Wolfe, Shirley
Wolfond, Deborah
Wollbaum, David
Wollmann, Bruno
Wong, Elsie
Wong, Katty
Wood, Audrey

PAYMENT

\$ 69,331
69,138
68,210
91,028
67,718
70,983
71,770
62,572
80,887
53,502
55,244
65,057
66,362
60,957
68,269
58,418
71,219
81,903
93,491
60,599
62,720
55,093
54,884
67,071
53,336
60,704
68,439
77,293
70,138
67,041
82,266
73,451
78,444
74,383
65,752
56,689
57,165
56,874
78,925
93,246
51,633
64,439
68,908
52,760
64,401
73,601
63,287
63,258
67,975
102,039
67,785
51,161
57,432
74,861
86,325
83,659
55,924
58,778

INDIVIDUAL

Wood, Sharon
Woodroffe Brown, Ngaire
Woods, Brad
Woolhether, William
Workman, Lisa
Wourms, Allan
Woycik, Wyatt
Wozniak, Laurie
Wright, Donna
Wright, Elaine
Wright, Garth
Wright, Vera
Wrobel, Lorna
Wrubleski, Melanie
Yake, Bonnie
Yang, Tracey
Yates, Sheila
Yee, Betty
Yee, Kathleen
Yee, Michelle
Yee, Raymond
Ylioja, Anita
Ylioja, Patti
Youck, Deanna
Young, Bonnie
Young, Dale
Young, Neil
Young, Nerissa
Yu, Elaine
Zacher, Gary
Zaiser, Juanita
Zamayla, Ronie
Zarusky, Wanda
Zawislak, Darlene
Zazulak, Irene
Zdunich, Brenda
Zech, Ken
Zerff, Terry
Zerr, Mollyann
Ziffle, Shannon
Zilm, Myrna
Zimmer, Doug
Zimmer, Martine
Zinger, Erwin
Zinkhan, Linda
Zinn, Tammy
Zitta, Rosalia
Zorn, Gail
Zummack, Darlene
Zurburg, Lisa

PAYMENT

\$ 81,016
82,432
76,475
53,686
53,826
55,200
63,448
105,846
75,071
52,612
122,864
67,736
52,543
55,380
60,496
56,426
72,307
78,508
56,072
70,089
88,423
74,309
78,962
78,027
58,159
82,437
73,253
63,765
66,951
75,386
72,819
89,802
68,246
65,468
64,340
67,956
51,614
56,788
57,884
57,858
58,573
51,588
64,415
68,390
71,075
62,399
65,954
65,697
55,289
64,469

These lists are also available for viewing upon request, during regular business hours, at any of the region's Health Sciences libraries, located at the Regina General and Pasqua hospitals, and the Wascana Rehabilitation Centre.

Transfers

Listed, by program, are transfers to recipients who received \$50,000 or more

RECIPIENT	TRANSFER
615672 Saskatchewan Ltd.	\$ 358,993
A S A.P. Therapy Services Ltd.	136,000
Aboriginal Family Service Centre	562,584
All Nations' Healing Hospital	3,080,475
Arcola Physiotherapy & Acupuncture Clinic	102,000
Autism Resource Centre Inc.	402,596
Backlin's Ambulance Services Ltd.	433,212
Circle Project Assoc Inc.	481,428
Courtside Sports Medicine & Rehabilitation	68,000
Cupar & District Nursing Home Inc.	2,174,855
Cupar Lions Volunteer Ambulance	194,594
Downtown Physiotherapy Centre	102,000
Extendicare Canada Inc.	18,383,141
Imperial & District Ambulance	83,805
JT Ambulance Services Ltd.	292,216
Lumsden & District Heritage Home Inc.	1,764,856
Maximum Potential Rehab Inc.	136,000
Mental Health Association / Regina Branch Inc.	373,095
Mobile Crisis Services Inc.	92,049
Phoenix Residential Society	1,012,659
Pioneer Village Special Care Corporation	19,994,607
Planned Parenthood Regina	92,555
Prairie Ambulance Care (1998) Ltd.	247,541
Rainbow Youth Centre Inc.	578,984
Red Cross	130,000
Regina Early Learning Center Inc.	554,977
Regina Open Door Society	173,602
Regina Recovery Homes Inc.	1,507,563
Regina Sports and Physiotherapy Clinic	68,000
Salvation Army-Waterston Centre	176,378
Santa Maria Senior Citizens Home Inc.	7,136,728
Soo Line Ambulance	159,919
Stapleford Physiotherapy Clinic	68,000
Stepping Stones Childcare Co-operative	203,907
The Qu'Appelle Diocesan Housing Company	1,062,123
The Regina Lutheran Housing Corporation	4,042,819
The Salvation Army William Booth Special Care Home	5,373,716
University of Regina	62,336
Valley Ambulance Care Ltd.	347,163

Supplier Payments

Listed are payees who received \$50,000 or more for the provision of goods and services, including office supplies, communications, contracts and equipment.

SUPPLIER	PAYMENT
101027726 Saskatchewan Ltd.	\$ 344,259
101039531 Saskatchewan Ltd.	171,040
101050094 Saskatchewan Ltd.	111,600
3M Canada Inc.	145,815
Abbott	1,839,218
Abdulla, Dr. R.H.	61,071
Abraham Ninan Medical PC Inc.	69,569
Acklands Grainger	128,472
Adam Dr. Suleman	251,558
Adekoya Dr. David	75,181
Advanced Response Vehicles Inc.	201,004
Advantage Med. Prof. Corp.	432,895
Agfa Healthcare Inc.	704,652
Alcon Canada Inc.	516,851
All Sask Coffee Services Inc.	134,975
Allergan Inc.	53,096
Amcom Software Inc.	78,837
American Medical Systems	91,568
AMO Canada Company	1,103,856
AMT Electro Surgery	383,036
Anisoft Group Inc.	54,464
Anixter Canada Inc.	70,074
Arch Transco Ltd.	158,841
Arjo Canada Inc.	172,302
Arrow Medical Products Ltd.	178,922
Associated Health Systems	168,424
Automated Canada	102,071
Avnet Computer Components	772,027
B K Medical Systems Inc.	176,838
B&R Holdings Inc.	69,520
Balfour Moss	163,694
Bank of Montreal	334,359
Bard Canada	469,606
Baxa Corporation	126,726
Baxter	2,012,050
Bayer (Miles) Canada	72,274
Baylis Medical	52,929
Bearingpoint	1,545,640
Beckman Coulter Canada Inc.	908,591
Becton Dickenson	238,391
Bella Lufu Dr. Mbuyamba	254,670
BHM Medical Inc.	51,421
Bio Rad Laboratories Canada Ltd.	311,704
Biomed	491,572
Biomerieux Canada Inc.	692,766
Biomet	171,977
Biopacific Diagnostic Inc.	88,323
Bles Biochemicals Inc.	78,625
Bomimed Inc.	135,326
Borderland Co-Operative Limited	57,020
Boston Scientific Corp	2,118,572
Brennan Office Plus	300,802
Bridge Brand Food Services	332,827

SUPPLIER	PAYMENT	SUPPLIER	PAYMENT
Bristol-Myers Squibb	\$ 188,389	Dr. Charles W. Kowalski Medical Prof Corp	\$ 379,252
Broadview And District Joint Health Commission	355,000	Dr. Corrine Jabs Medical Prof Corp	52,242
Brunswick Filing Systems Inc.	145,698	Dr. Craig Bosenberg Anesthesia Medical Professional Corporation	102,324
Bunzl Canada	904,039	Dr. D. T. Hunter Medical Prof Corp	86,081
Busse, Dr. E.F.G.	103,463	Dr. David Kopriva Medical Professional Corporation	62,244
CAA Travel Agency	128,567	Dr. Edward Patterson Medical Prof Corp	265,395
CADD FM Management	77,981	Dr. Elizabeth Thomas Medical Prof Corp	54,395
Can Med Healthcare	1,205,880	Dr. Eric Le Roux Medical Professional Corporation	415,377
Canada Bread	87,215	Dr. Gavin Jones Medical Prof Corp	212,568
Canada Microsurgical Ltd.	131,862	Dr. J. Stewart McMillan Medical Professional Corporation	187,275
Canadian Corps Of Commissioners	115,523	Dr. J. Vlok Medical Prof Corp	350,771
Canadian Council on Health Services Accreditation	77,626	Dr. James Mchattie Medical Prof Corp	148,218
Canadian Hospital Specialties Ltd.	62,517	Dr. Jane Arthur Medical Prof Corp	346,553
Canadian Medical Protective Association	68,337	Dr. Juri Van Staden Medical Prof Corp	218,607
Cardinal Health Canada 302 Inc.	244,690	Dr. L. Brydon Medical Prof Corp	54,742
Cardinalhealth	57,437	Dr. Linda Emslie Medical Professional Corporation	366,072
Carestream	100,802	Dr. Louis Huisamen Medical Prof Corp	111,284
Carsen Group Inc.	1,160,449	Dr. Lucas Potgieter Medical Professional Corporation	445,518
Carsen Medical	134,865	Dr. Mark Cherry Medical Professional Corporation	133,179
Carson, Dr. G.	115,019	Dr. Mohamed AM Gheis Medical Prof Corp	121,698
CEG Energy Options	3,425,255	Dr. Nasimbanu Alibhai Medical Professional Corporation	86,181
Centennial Foodservice	60,064	Dr. Natarajan Medical Professional Corporation	408,592
Chan, Dr. J.	72,122	Dr. Ole Rasmussen Medical Prof Corp	86,206
Chang, Dr. Paul	154,607	Dr. Patel S. Medical Professional Corporation	90,245
Christie Mechanical Ltd.	94,750	Dr. S. C. Bester Medical Prof Corp	86,281
City of Regina	1,208,624	Dr. S. Haque Medical Prof Corp	321,660
Coca-Cola Bottling Ltd.	89,346	Dr. S. Vuksic Medical Prof Corp	89,285
Coherent AMT	277,846	Dr. Shashi Suri Medical Prof Corp	125,638
Commercial Alcohols Inc.	86,481	Dr. T. Potgieter Medical Professional Corporation	277,019
Commercial Telecom	53,203	Dr. V. K. Patel Medical Prof Corp	342,255
Concentra Financial	182,634	Dr. V. Scott Medical Professional Corp	255,226
Conmed Corp	99,463	Dr. Vijay Trivedi Medical Professional Corporation	537,542
Cook (Canada) Inc.	929,622	Dr. Y. Abu Ghazaleh Medical Professional Corporation	156,041
Coutts Courier Company Ltd.	121,220	Dr. Yacoub and Dr. Kooiman Medical Prof Corp	243,541
CPDN #3130827 Canada Inc.	4,831,210	Ebsco	266,727
Crane Supply	86,238	Eclipsys Corporation	84,713
Crestline Coach	182,139	Eden Textile	167,900
Crestview Chrysler Dodge Jeep	57,901	Edward C. Alport Medical Professional Corporation	69,067
Crown Shred & Recycling	59,877	Edwards Lifesciences (Canada) Inc.	423,531
Custom Water Ltd.	52,623	Eecol Electric (Sask) Ltd.	196,330
Dade Behring	95,143	Eisa Medical Prof Corp	352,694
Damodharan Psychiatric Services PC Inc.	316,387	Ekong, Dr. C. E.	55,009
Danka Financial	55,162	Esbe Scientific	167,724
Datamark Systems Business Document Providers	70,423	Essalah, Dr. A.	162,917
Dawson Services Ltd.	170,092	Extensity Canada Limited	154,246
Denis Jones Medical Prof Corp	84,018		
Depuy (Canada) Ltd.	2,053,407		
Devel Tech Inc.	61,050		
Develus Systems Inc.	209,182		
Dictaphone	208,105		
DJ Orthotics	188,580		
DLGL Ltd.	493,836		
Domco Construction Inc.	8,279,510		
Dominion Biologicals Ltd.	100,153		
Dr. Allison Crichlow Medical Prof Corp	93,396		

SUPPLIER	PAYMENT	SUPPLIER	PAYMENT
Falkenberg, Dr. Konnie	\$ 220,020	Kone Inc.	\$ 163,625
Farnorth Sales Association	68,672	KPMG LLP	178,310
Ferguson, Kathy	110,957	Kyphon Canada Inc.	81,713
Fisher Scientific Ltd.	488,840	L & B Roofing Limited	175,870
Flynn Roofing (Canada) Ltd.	112,206	Labuschagne Medical Prof Corp	376,094
Fraser Health Authority	127,669	Lac-Mac Limited	169,809
Freebird Writing Services Inc.	58,228	Lang, Dr. Mike	153,843
Fresenius Medical Care Canada	95,237	Laursen, Dr. B.	148,636
G M S Linen Handling System	125,409	Linvatec Canada	541,061
Gambro	1,760,975	Login Brothers Canada	58,191
Gamma Dynacare Medical Lab	2,654,219	Loraas Disposal Service Ltd.	118,446
Ganshorn, Dr. K.	86,377	Lynden International Logistics	467,680
GE Clinical Services	554,824	MacPherson Leslie & Tyerman	3,878,067
GE Healthcare	740,068	Magic White Janitors' Warehouse	52,373
GE Medical Systems Canada	1,100,369	Mang, Dr. Annabelle	91,045
Genpharm Inc.	63,904	Maquet-Dynamed Inc.	479,148
Gerbrands Medical Prof Corp	103,767	Marsh Canada Limited	348,969
Getinge Canada Limited	259,825	Maslany, Dr. Jurgen	65,610
Ghaniabadi, Dr. D.	73,166	McCahill Medical Prof Corp	266,927
Ghumman, Dr. T.	112,261	McCarville, Don	65,751
Gibbings, Dr. E.	59,790	McKesson Canada	1,987,695
Goldkey Consulting Inc.	99,876	MDS Nordion	74,490
Grand & Toy Technology	1,102,549	Med 2020	170,548
Grant Medical	50,967	Medical Mart	68,780
Guidant Canada	152,644	Medichair South Sask	76,209
Harold, Dr. Brent	61,187	Medi-Fax Canada Inc.	271,662
Healthcare Insurance Reciprocal of Canada	1,065,366	Med-I-Pant	119,411
Healthmark Ltd.	107,267	Meditek	262,348
Heroux, Martin	65,007	Medtronic	6,015,416
Hewlett Packard Canada Ltd.	300,302	Merck Frosst Canada Ltd.	297,690
Hipperson Construction	541,769	Meyer, Dr. Abraham	77,051
HJ Linnen Associates	336,188	Microage Computer Centres	541,913
Hollister Limited	70,379	Microbiology International	53,646
Holmes, Dr. S B	184,508	Minister of Finance	4,257,246
Honeywell Limited	152,568	Moore Corporation	116,255
Horizon Computer Solutions	83,031	MTS Allstream Inc.	61,374
Hospira Healthcare Corporation	3,564,314	Nagels Audio Visual Ltd.	72,177
Hughes, Robin	57,684	Nalco Canada Inc. #C3124	97,526
Huisamen, Dr. Charles	144,962	Nellcor Puritan Bennett (Melville) Ltd.	111,435
HVDM Medical Prof Corp	322,319	Nestle Clinical Nutrition	93,663
Inamed Aesthetics	220,825	Newton, Dr. M.P.	127,875
Independents Choice Distribution	318,270	Novartis Ophthalmics	420,093
INO Therapeutics	76,992	Novartis Pharmaceuticals Canada	112,722
Ipsco Place	51,149	O'Carroll, Dr. Tiann	77,520
Iseco North America Inc.	80,005	O'Grady, Dr. M.	161,178
Ishaan Sundar Medical Prof Corp	357,126	Oko Haus Design	62,845
Janssen Ortho Inc.	1,570,726	Ollenberger, Dr. Glenn	570,009
Jayaprakash Medical Prof Corp	416,199	Olympus Canada Inc.	801,303
Jeffrey Betcher Medical Professional Corporation	135,881	Omni Facility Services Canada Corp	149,607
John Tsang Medical Prof Corp	72,277	One-Stop Vacuum Centre	53,494
Johnson and Johnson	2,658,860	Oracle Corp Canada Inc.	179,616
Joy Dobson Medical Prof Corp	130,173	Orange Properties Sask Ltd.	726,365
K & S Bakery Products	96,641	Organon Canada Ltd.	155,884
Karl Storz Endoscopy America	220,660	Ortho Clinical Diagnostics Inc.	209,455
Kaspilai, Dr. G. A. L.	103,598	Orto Ped	240,319
KCI Medical Canada	458,708	Oryx Pharmaceuticals Inc.	73,800
KMP LAW	51,504	Ossur	255,448
		Otto Bock Healthcare Canada Ltd.	250,410

SUPPLIER	PAYMENT	SUPPLIER	PAYMENT
Oxoid Inc.	\$ 81,693	SaskEnergy Incorporated	\$ 234,448
Pacific and Western Bank of Canada	69,364	SCC Soft Computer	573,267
Partssource	53,987	Schaan Healthcare Products	4,730,566
PC Place	335,205	Schering Canada Inc.	1,441,672
PCL - Maxam A Joint Venture	386,661	Schoeman, Dr. S.	68,533
Pebane, Dr. Don	254,670	Scican	149,595
Percy H Davis	81,489	Seibel, Dr. Debbie	50,953
Peridot Medical Inc.	65,854	Sexauer Ltd.	52,669
Peters, Catherine	52,209	Sharman, Dr. M.G.	81,232
Peti, Dr. Charles A.	74,485	SIAS Wascana Institute	101,844
Petro Canada	208,362	Siemens Canada Ltd.	51,305
Petro-Canada Regina Farm And Commercial Sales	97,022	Siemens Hearing Instruments Ltd.	338,594
Petryk, Dr. Susan	218,125	Sigma Automation Ltd.	90,209
Pharmacy Computer Services Inc.	87,125	Site Management Services Inc.	69,176
Philips Medical Systems Canada	1,578,402	Skillsoft	69,000
Phonak Canada Ltd.	56,573	Smith and Nephew Inc.	56,131
Phonic Ear Ltd./Oticon	66,728	Smith and Nephew Surgical	622,299
Pierre Pepler Medical Prof Corp	351,783	Smith, Dr. Sheila	87,643
Pieter Muller Medical Prof Corp	428,605	Smiths Medical Canada Ltd.	547,344
Pillay, Dr. Kumaravel	96,397	Softchoice Corporation	455,144
Pilling Weck Canada L.P.	227,432	Solo Consulting	86,392
Pipestone Kin-Ability Centre Inc.	68,439	Solution Q Inc.	78,446
PML Microbiologicals	133,470	Somagen Diagnostics	451,074
PPC	63,552	Sorin Group Canada Inc.	191,711
Prairie Distributors (Central) Inc.	110,128	Source Medical	4,707,457
Praxair Canada Inc.	171,904	St. Jude Medical Canada Inc.	518,016
Primed Canada Inc.	120,117	Stan and Judy Rice	80,249
Provincial Medical Supply	542,316	Stantec Architecture Ltd.	574,795
Purolator Courier Ltd.	51,155	Stantec Consulting Ltd.	68,348
Quest Software	65,007	Starkey Labs - Canada Co.	382,150
R and D Paving and Landscaping	60,208	Steris Canada Ltd.	228,712
Radford, Dr. Randall	97,225	Sterling Truck & Trailer	77,249
Radiology Associates of Regina Medical PC Inc.	10,727,503	Stone Hutchinson Architects Ltd.	848,713
Radiometer Canada	116,178	Stryker Canada	2,126,494
Rathgeber, Dr. Lane	72,849	Summit Technologies Inc.	72,799
Ratner Realty Properties Inc.	394,352	Sunil V. Khaladkar Medical Prof Corp	81,207
Reddi, Dr. K.	315,834	Surgipath Canada Inc.	91,028
Regina & District Food Bank Inc.	81,225	Swart, Dr. M.	373,288
Results Media Buying Service	57,581	Synthes (Canada) Ltd.	705,568
Ritenburg & Associates	160,501	Sysco	3,107,430
Roche Diagnostics	338,687	Taylor, Dr. Ron	51,957
Ross, Dr. Terry	314,090	Terblanche, Dr. Marthinus W.T.	52,291
Roxon Medi Tech	64,932	The Alport Family Trust	63,102
Rudovich Medical Professional Corporation	384,309	The Caldwell Partners International	59,891
Ruthnum, Dr. L. P.	160,170	The Stevens Company	896,906
Ryan Consulting Services Inc.	157,378	Theo Le Roux Medical Prof Corp	83,210
Sammons Preston Canada Inc.	66,277	Trade West Equipment Ltd.	138,147
Sanofi Pasteur Limited	89,894	Tricific Enterprises	140,032
Saputo Foods Ltd.	83,876	Trudell Medical Supply	133,527
Saskatchewan Association of Health Organizations	816,680	Tyco Healthcare Group Canada Inc.	3,480,556
Saskatchewan Finance	732,450	Umuthi Medical PC Inc.	364,904
Saskatchewan Power Corporation	5,300,054	Unisource	318,015
Saskatchewan Telecommunications	2,033,446	University of Regina	87,247
Saskatchewan Workers Compensation Board	3,605,620	University of Saskatchewan	124,914
Saskatoon Health Region	174,954	Van Der Merwe, Dr. A.	158,959
		Van Der Merwe, Dr. E.	233,639
		Van Der Merwe, Dr. J.	105,593
		Van De's Accessible Transit Inc.	51,221

SUPPLIER		PAYMENT
Ventana Medical Systems	\$	104,835
Vipond Fire Protection Inc.		128,816
Vista Technology Inc.		80,330
Vital Aire		348,512
Vital Aire Clinical Orders		55,970
Vitality Foodservice Canada Co.		107,895
Vorster, Dr. B.		329,554
VWR International		359,534
W L Gore & Associates Canada Inc.		101,861
W. Laframboise Ltd.		55,076
Wahba, Dr. Mark		74,539
Walter Lorenz Surgical		55,233
Walters Industrial Mechanical		661,772
Waterloo Bedding		67,159
Waterous Power Systems		517,727
Westcor Builders (Sask) Inc.		97,598
Widex Canada Ltd.		135,807
Wyeth Pharmaceuticals		298,444
Xerox Canada Inc.		130,100
Yueng Chan A. Medical Prof Corp		65,613
Zimmer		137,284

2006-2007 PERFORMANCE MANAGEMENT SUMMARY

In support of *The Action Plan for Saskatchewan Health Care*, Saskatchewan Health developed an *accountability framework* and accountability documents with each health region that define and clarify the performance relationship between the authorities and the province. In addition to articulating organizational and program expectations of the RHAs, the accountability documents also link these expectations with funding and with performance indicators—measures of progress towards, and achievement of, the expectations.

To demonstrate accountability and transparency to the public, these indicators are publicly reported through this summary table in each region's annual report. For further information on technical interpretations and definitions of the indicators below refer to the Performance Management document on the Saskatchewan Health website at www.health.gov.sk.ca.

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
ORGANIZATIONAL EFFECTIVENESS INDICATORS					
QUALITY					
Date of last CCHSA accreditation or when accreditation is scheduled <i>as of March 2007</i>		April 2005	not applicable	not applicable	to be determined
Date when the RHA participated in the Institute for Safe Medication Practices (ISMP) Canada "Hospital Medication Safety Self-Assessment," or when participation is planned <i>as of March 2007</i>		March 2004	not applicable	not applicable	to be determined
Number of client contacts with the Quality of Care Coordinator to raise a concern <i>2005-2006</i>		1,404	not applicable	not applicable	not applicable
Percentage of concerns raised with a Quality of Care Coordinator concluded within 30 days <i>2005-2006</i>		88%	86%	66% - 99%	to be determined
WORKFORCE PLANNING					
The number of positions sitting vacant for periods longer than six months <i>[indicator to be developed]</i>		—	—	—	—
Distribution of health system full time equivalents (FTEs) by affiliation <i>2006-2007</i>	Provider Unions (CUPE, SEIU, SGEU)	3,920.80	not applicable	not applicable	not applicable
	HSAS	592.49			
	OOS/OTHER ¹	536.75			
	SUN	1,693.81			
	RWDSU ²	71.91			
	Organization as a whole	6,815.76			

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
Number of wage-driven premium hours (overtime and other premiums) per full time equivalent (FTE) by affiliation 2006-2007	Provider Unions (CUPE, SEIU, SGEU)	49.34	36.85	16.36 – 91.10	to be determined ¹
	HSAS	36.94	25.44	0.25 – 117.97	to be determined ¹
	OOS/OTHER ¹	2.30	3.46	0.00 – 16.92	to be determined ¹
	SUN	113.15	81.54	27.14 – 368.66	to be determined ¹
	RWDSU ²	26.98	not applicable	not applicable	to be determined ¹
	Organization as a whole	60.18	42.47	17.19 – 131.56	to be determined ¹
Worked hours as a percentage of total hours by affiliation 2006-2007	Provider Unions (CUPE, SEIU, SGEU)	77.8%	78.3%	73.1% – 80.7%	to be determined ¹
	HSAS	79.8%	80.8%	75.0% – 83.9%	to be determined ¹
	OOS/OTHER ¹	83.0%	82.5%	76.4% – 84.5%	to be determined ¹
	SUN	72.9%	74.7%	63.7% – 77.9%	to be determined ¹
	RWDSU ²	77.5%	not applicable	not applicable	to be determined ¹
	Organization as a whole	77.1%	78.1%	72.5% – 80.7%	to be determined ¹
Number of sick leave hours per full time equivalent (FTE) by affiliation 2006-2007	Provider Unions (CUPE, SEIU, SGEU)	88.72	89.78	71.62 – 107.61	to be determined ¹
	HSAS	65.71	65.62	44.65 – 92.53	to be determined ¹
	OOS/OTHER ¹	43.39	47.34	27.68 – 61.46	to be determined ¹
	SUN	93.61	89.34	63.83 – 96.84	to be determined ¹
	RWDSU ²	98.39	not applicable	not applicable	to be determined ¹
	Organization as a whole	84.47	84.12	64.15 – 93.63	to be determined ¹
Number of lost-time WCB claims per 100 full time equivalents (FTEs) 2006-2007		8.05	7.67	0.53 – 10.00	to be determined ¹
Number of lost-time WCB days per 100 full time equivalents (FTEs) 2006-2007		655.51	468.45	38.43 – 766.40	to be determined ¹
Percentage of employees self-identifying as Aboriginal 2005-2006		3.1%	not available	not applicable	to be determined
Number of clinical placements offered and taken within the region/SCA [indicator to be developed]		–	–	–	–

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
FINANCIAL					
Surplus (deficit) 2006-2007		\$7,861,926	not applicable	\$90,050 - \$7,861,926 ⁽¹⁾	\$0
Surplus (deficit) as a percentage of actual operating expenditures 2006-2007		1.3%	not applicable	0.1% - 9.0% ⁽²⁾	0.0% - 0.5%
Working capital ratio (current ratio) 2006-2007		0.44	not applicable	0.23 - 1.81 ⁽³⁾	to be determined
Number of days able to operate with working capital 2006-2007		(29.14)	not applicable	(61.97) - 28.71 ⁽⁴⁾	to be determined
COMMUNICATIONS AND ISSUES MANAGEMENT					
Key activities undertaken by RHA to address public confidence reported 2006-2007 [yes/no indicator]	Q1	Yes	not applicable	not applicable	significant activity is expected annually, but need not be reflected quarterly
	Q2	Yes			
	Q3	Yes			
	Q4	Yes			
CAPITAL					
Annual equipment maintenance costs as a percentage of annual equipment replacement costs [indicator to be developed]		-	-	-	-
PROGRAM-SPECIFIC INDICATORS					
PROVINCE-WIDE SERVICES					
Number of patients as a percentage of agreed on target for magnetic resonance imaging (MRI) services ⁵ 2006-2007		101.2%	102.4%	101.2% - 103.3%	100%
Number of exams as a percentage of agreed on target for magnetic resonance imaging (MRI) services ⁵ 2006-2007		85.9%	90.6%	85.9% - 93.1%	100%
Number of actual hours of operation for magnetic resonance imaging (MRI) services ⁵ 2006-2007		6,859	not applicable	not applicable	to be determined
Number of patients as a percentage of agreed on target for computed tomography (CT) services ⁶ 2006-2007		98.8%	98.0%	93.5% - 111.0%	100%
Number of exams as a percentage of agreed on target for computed tomography (CT) services ⁶ 2006-2007		125.6%	107.3%	73.5% - 125.6%	100%
Number of actual hours of operation for computed tomography (CT) services ⁶ 2006-2007		11,250	not applicable	not applicable	to be determined

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
Number of patients as a percentage of agreed on target for bone mineral densitometry (BMD) services ⁵ 2006-2007		78.4%	90.5%	78.4% - 101.7%	100%
Number of actual hours of operation for bone mineral densitometry (BMD) services ⁵ 2006-2007		1,924	not applicable	not applicable	to be determined
Number of patient years of dialysis provided in the current fiscal year ⁷ 2006-2007		277.65	not applicable	not applicable	to be determined
Current fiscal year's chronic kidney disease services levels as compared to previous fiscal year's levels ⁸ As at December 31, 2006	Number of chronic renal insufficiency patients	759	not applicable	not applicable	to be determined
	Number of peritoneal dialysis patients	59			
	Number of home unit chronic hemodialysis patients	230			
	Number of north/south chronic hemodialysis patients	294			
Average wait time for admission to Saskatchewan Hospital North Battleford (SHNB) ⁹ 2005-2006		N/A	not applicable	not applicable	to be determined
Length of stay efficiency of inpatient rehabilitation programs - Wascana Rehabilitation Centre and Saskatoon City Hospital ^{10,11} 2005-2006	Stroke	0.6	not applicable	not applicable	to be determined
	Brain Dysfunction	0.4			
	Spinal Cord Dysfunction	0.6			
	Orthopedic Conditions	0.6			
	Neurological Conditions	1.6			
	Amputation of Limb	0.3			
	Major Multiple Trauma	0.6			
	Medically Complex	0.8			
	Debility	N/A			
	Cardiac	N/A			
	Pulmonary	N/A			
	Arthritis	N/A			
	Pain Syndrome	N/A			
	Other	0.4			
Alcohol and drug inpatient treatment completion rate per 100 admissions - Calder Centre ¹² 2005-2006	Child/Youth -	72.2	not applicable	not applicable	to be determined
	Adult	77.5			

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
ACUTE CARE					
Percentage of surgical cases performed as day surgery ¹³ 2006-2007		52.8%	56.3%	39.1% – 74.8%	not applicable
Number and percentage of surgical cases on wait list that have already waited over 12 months ¹³ 2006-2007	Number	1,891	not applicable	not applicable	not applicable
	Percentage	21.4%	19.9%	0.0% – 23.8%	10%
Number and percentage of surgical cases on wait list that have already waited over 18 months ¹³ 2006-2007	Number	835	not applicable	not applicable	not applicable
	Percentage	9.5%	9.5%	0.0% – 12.0%	0%
Percentage of Priority Level I, II, III and IV surgical cases completed within target time frames ¹³ 2006-2007	Priority Level I within 3 weeks	43.7%	57.3%	43.7% – 97.4%	95%
	Priority Level II within 6 weeks	30.0%	43.8%	0.0% – 96.6%	90%
	Priority Level III within 3 months	43.3%	63.9%	43.3% – 100.0%	90%
	Priority Level IV within 12 months	79.3%	88.0%	79.3% – 100.0%	90%
Cumulative number of surgical cases performed as a percentage of target and variance from target ¹³ 2006-2007	Percentage of target	96.9%	98.3%	85.2% – 122.4%	100%
	Variance from target	-665	not applicable	not applicable	not applicable
INSTITUTIONAL SUPPORTIVE CARE					
Average wait time between approval for placement and placement for institutional supportive care services <i>[indicator to be developed]</i>		–	–	–	–
Prevalence of pressure sores: percentage of institutional supportive care residents with pressure sores ¹⁴ as at the end of Q2 2006-2007		19.15%	21.94%	16.47% – 28.28%	to be determined
Case mix index for institutional supportive care facilities ¹⁴ as at the end of Q2 2006-2007		0.725	0.771	0.725 – 0.800	to be determined
HOME-BASED SUPPORTIVE CARE					
Case mix index for supportive home care services <i>[indicator to be developed]</i>		–	–	–	–
Average wait time between referral and assessment for supportive home care services <i>[indicator to be developed]</i>		–	–	–	–
Average wait time between assessment and commencement of supportive home care services <i>[indicator to be developed]</i>		–	–	–	–

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
POPULATION HEALTH SERVICES					
Percentage of off reserve schools that are implementing health food nutrition policies as of September 1, 2006		3.3%	not applicable	0.0% - 27.3%	60% of schools by September 2011
Exclusive breastfeeding rates ¹⁵ 2005		18.25% (weighted)	21.28%	13.64% - 40.11%	to be determined
Percentage of eligible population registered in SIMS and receiving recommended immunization at second birthday ¹⁶ July 1, 2005 to June 30, 2006	Diphtheria	68.2%	73.5%	50.0% - 87.2%	to be determined
	Measles	67.9%	72.5%	67.9% - 86.1%	
Influenza immunization rate per 100 population (age 65 years and over) 2005-2006		72%	66%	46% - 77%	to be determined
Percentage of licensed or regulated facilities inspected each year (pursuant to The Public Health Act) 2005-2006 and 2006-2007	FEE - Food Eating Establishment	82%	not applicable	45% - 100%	80% - 100%
		83%		71% - 100%	
	FPL - Food Processing (Licensed)	80%	not applicable	20% - 100%	
		85%		67% - 100%	
	LA - Licensed Accommodations	53%	not applicable	31% - 100%	
		80%		52% - 100%	
	SP - Swimming Pools	72%	not applicable	43% - 100%	
		87%		45% - 100%	
Public Water Supplies	75%	not applicable	20% - 100%	18% - 100%	
	77%				
Percentage of genital chlamydia cases with complete or required surveillance information in the electronic provincial surveillance system within established time frames <i>[indicator to be developed further]</i>		-	-	-	-
Percentage of facilities in compliance with The Tobacco Control Act in the category that includes: billiard halls/bingo establishments/bowling centres/casinos/restaurants/taverns <i>[data is currently not available due to system implementation issues]</i>		-	-	-	90% compliance
Percentage of population (age 12 years and over) who are current (daily or occasional) smokers ¹⁵ 2005	Males	22.85% (weighted)	25.13%	19.95% - 41.75%	to be determined
	Females	21.63% (weighted)	23.30%	16.36% - 32.31%	

INDICATOR	RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
COMMUNITY CARE SERVICES				
Average wait time between initial contact and first face-to-face contact for outpatient child and youth mental health services <i>[indicator to be developed]</i>	-	-	-	-
Average wait time between initial contact and first face-to-face contact for outpatient adult community mental health services <i>[indicator to be developed]</i>	-	-	-	-
Average wait time between initial contact and first face-to-face contact for outpatient psychiatric rehabilitation mental health services <i>[indicator to be developed]</i>	-	-	-	-
Alcohol and drug outpatient treatment completion rate per 100 admissions 2005-2006	62.1%	59.7%	41.8% - 72.2%	to be determined
Average wait time for admission to alcohol and drug outpatient services <i>[data not available]</i>	-	-	-	-
Problem gambling treatment completion rates per 100 admissions <i>[indicator to be developed]</i>	-	-	-	-
HOME-BASED ACUTE AND PALLIATIVE CARE				
Average wait time between referral and assessment for acute and palliative home care services <i>[indicator to be developed]</i>	-	-	-	-
Average wait time between assessment and commencement of home-based acute and palliative care <i>[indicator to be developed]</i>	-	-	-	-
Percentage of palliative home care clients with unresolved pain <i>[indicator to be developed]</i>	-	-	-	-
Percentage of palliative home care clients who choose to die at home and receive services in support of that option <i>[indicator to be developed]</i>	-	-	-	-
Percentage of patients discharged from acute care to home care with post-acute discharge plan in place on discharge <i>[indicator to be developed]</i>	-	-	-	-

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
PRIMARY HEALTH SERVICES					
Percentage of RHA population with geographic proximity to primary health care teams <i>March 2007</i>		15.94%	19.98%	0.00% – 100.00%	25% of SK residents by 2006, 100% by 2011
Number of discrete clients receiving primary health care services in the RHA <i>2006-2007</i>	Q1	6,150	not applicable	not applicable	not applicable
	Q2	6,981			
	Q3	9,277			
	Q4	8,153			
Number of HealthLine calls for the RHA <i>2006-2007</i>	Q1	6,288	not applicable	not applicable	not applicable
	Q2	6,664			
	Q3	7,263			
	Q4	6,975			
	Year as a whole	27,190			
Total number of new primary health care teams developed in the current year <i>2006-2007</i>		3	not applicable	not applicable	not applicable
EMERGENCY RESPONSE SERVICES					
Percentage of calls where the maximum qualification of all personnel on the call was less than Emergency Medical Technician (EMT) <i>2005-2006</i>		0.07%	0.73%	0.00% – 17.97%	to be determined
MENTAL HEALTH AND ADDICTION SERVICES					
Average length of stay of mental health inpatients (days) ¹⁸ <i>2005-2006</i>	Average Length of Stay	19.8	15.4	10.1 – 19.8	to be determined
Mental health inpatient readmission rate per 100 mental health inpatients ¹⁸ <i>2005-2006</i>		18.4%	20.9%	18.4% – 25.7%	to be determined
Alcohol and drug inpatient treatment completion rate per 100 admissions ¹⁹ <i>2005-2006</i>		69.2%	69.1%	55.9% – 72.6%	to be determined
Average wait time for admission to alcohol and drug inpatient services (days) ²⁰ <i>February and March 2007²¹</i>		23	not applicable	not applicable	to be determined
Average wait time for admission to alcohol and drug detoxification services ²¹ <i>February and March 2007²¹</i>		0.2	not applicable	not applicable	to be determined
Average wait time for admission to alcohol and drug stabilization services ²² <i>February and March 2007²¹</i>		0.9	not applicable	not applicable	to be determined
Average wait time for admission to alcohol and drug long term residential treatment services ²³ <i>[data not available]¹⁸</i>		–	–	–	–

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
PROGRAM SUPPORT SERVICES					
Expenditures in program support funding pool as a percentage of total RHA operating expenditures 2006-2007		5.1%	not applicable	3.8% – 10.5% ¹³	12% for Mamawetan Churchill River and Keewatin Yatthe; 5% for all other RHAs
HEALTH STATUS AND OUTCOME INDICATORS					
Infant mortality rate per 1,000 live births ²⁴ 2002-2004		6.2	5.9	4.0 – 10.5	to be determined
Low birth weight rate per 100 live births ²⁴ 2002-2004		5.8	5.4	3.7 – 6.0	to be determined
High birth weight rate per 100 live births ²⁴ 2002-2004		15.4	15.7	12.9 – 31.1	to be determined
Potential years of life lost per 100,000 population (age 0 to 74 years) ¹⁵ 2001 ²⁵	Circulatory Diseases	947.8	951.5	817.9 – 1,208.9	to be determined
	All Malignant Neoplasms	1,570.5	1,483.1	1,126.0 – 1,706.8	
	All Respiratory Diseases	219.7	222.9	63.5 – 376.5	
	Unintentional Injuries	845.3	1,028.0	636.4 – 2,781.8	
	Suicide and Self-Inflicted Injuries	395.8	412.1	315.1 – 628.5	
Disability-free life expectancy (at birth) ¹⁵ 1996 ²⁶	Males	66.4	66.6	61.8 – 69.2	to be determined
	Females	70.3	70.0	63.2 – 72.5	
Disability-free life expectancy (at age 65 years) ¹⁵ 1996 ²⁶	Males	11.1	11.2	8.7 – 12.1	to be determined
	Females	13.0	12.7	8.4 – 13.2	
Life expectancy (at birth) ¹⁵ 2001 ²⁷	Males	76.4	76.2	72.1 – 78.2	to be determined
	Females	81.9	81.8	76.1 – 82.8	
Life expectancy (at age 65 years) ¹⁵ 2001 ²⁷	Males	17.1	16.9	15.6 – 18.0	to be determined
	Females	21.0	20.9	17.2 – 21.8	
Self-rated health status: percentage of population (age 12 years and over) who report their health as very good or excellent ¹⁵ 2005		57.2%	52.35%	39.86% – 57.96%	to be determined
Percentage of population (age 18 to 64 years) who are overweight or obese ¹⁵ 2005	Overweight (BMI 25.0-29.9)	30.75%	32.52%	30.53% – 36.12%	to be determined
	Obese (BMI 30.0+)	17.35%	20.03%	16.88% – 24.19%	

INDICATOR		RHA VALUE	PROVINCIAL VALUE	RANGE	TARGET
Percentage of population (age 12 years and over) who report physical activity participation levels of active/moderately active or inactive ¹⁵ 2005	Active/moderately active	52.66%	48.62%	38.60% – 53.35%	to be determined
	Inactive	45.41%	49.52%	44.06% – 58.77%	
Number of visits to a physician for a mental health reason 2005-2006	General Practitioners	100,133	not applicable	not applicable	not applicable
	Psychiatrists	13,848			
Age & sex adjusted diabetes prevalence rate per 1,000 population ¹⁶ 2004-2005		54.1	not applicable	41.8 – 95.8	to be determined
Injury hospitalization rate per 1,000 population (age 0 to 19 years) 2004-2005	Males	10.2	10.4	7.3 – 27.0	to be determined
	Females	6.8	6.9	4.8 – 12.9	
Hospitalization rate due to falls per 1,000 population (age 65 years and over) 2004-2005	Males	14.0	14.7	10.5 – 22.0	to be determined
	Females	24.7	26.6	19.9 – 38.0	

NOTES:

PLEASE REFER TO THE DOCUMENT "PERFORMANCE MANAGEMENT ACCOUNTABILITY INDICATORS" FOR DETAILED INDICATOR DESCRIPTIONS.

1. The OOS/OTHER category includes all non-unionized employees on the SAHO Payroll system, not just management personnel.
2. The RWDSU category is applicable to Regina Qu'Appelle only.
3. Benchmark development is still in progress for the workforce planning indicators. In the interim, it is suggested that the provincial value or that of the best performer be used as the target.
4. The most recent data for the "Percentage of employees self-identifying as Aboriginal" indicator is from 2005/2006, and is not available for Five Hills, Cypress, Heartland, Prairie North, the Saskatchewan Cancer Agency, or the province as a whole.
5. MRI and bone mineral densitometry indicators are applicable to Regina Qu'Appelle and Saskatoon only.
6. CT indicators are applicable to Cypress, Five Hills, Prairie North, Prince Albert Parkland, Regina Qu'Appelle, Saskatoon, and Sunrise only.
7. Patient years of dialysis indicator is applicable to Cypress, Five Hills, Regina Qu'Appelle, Saskatoon, Kelsey Trail, Prairie North, Prince Albert Parkland, and Sunrise only.
8. Chronic kidney disease services indicator is applicable to Regina Qu'Appelle and Saskatoon only.
9. SHNB indicator is applicable to Prairie North only.
10. "Length of stay efficiency of inpatient rehabilitation programs" indicator is applicable to Regina Qu'Appelle (Wascana Rehabilitation Centre) and Saskatoon (Saskatoon City Hospital) only.

11. Wascana Rehabilitation Centre and Saskatoon City Hospital are not peer facilities, in terms of their inpatient rehabilitation programs. Therefore, their results should not be compared to each other.
12. "Alcohol and drug inpatient treatment completion rate – Calder Centre" is applicable to Saskatoon only.
13. The 2006/2007 target volume of surgeries to be performed by each RHA was negotiated between that RHA and Saskatchewan Health.
14. Due to the small number of institutional supportive care residents in Mamawetan Churchill River and Keewatin Yatthé, the case mix index and pressure sores indicators are not applicable to these regions.
15. Mamawetan Churchill River, Keewatin Yatthé and Athabasca Health Authority were grouped together as "Northern Health Regions" for this indicator.
16. The Saskatchewan Immunization Management System (SIMS) does not capture on-reserve immunizations.
17. Data collection through the Alcohol and Drug Client Information System (ADCIS) will start in April 2007. Results for alcohol and drug inpatient, detoxification, and stabilization services are based on data collected manually in February and March 2007 (Saskatoon detoxification data available for March 2007 only).
18. Mental health inpatient indicators are not applicable to Heartland, Keewatin Yatthé, Kelsey Trail, and Mamawetan Churchill River.
19. "Alcohol and drug inpatient treatment completion rate" is applicable to Keewatin Yatthé, Mamawetan Churchill River, Prairie North, Regina Qu'Appelle, and Saskatoon only.
20. "Average wait time for admission to alcohol and drug inpatient services" is applicable to Keewatin Yatthé, Mamawetan Churchill River, Prairie North, Prince Albert Parkland (youth services), Regina Qu'Appelle, and Saskatoon (both adult and youth services) only.
21. "Average wait time for admission to alcohol and drug detoxification services" is applicable to Five Hills, Keewatin Yatthé, Mamawetan Churchill River, Prairie North, Regina Qu'Appelle, and Saskatoon only.
22. "Average wait time for admission to alcohol and drug stabilization services" is applicable to Regina Qu'Appelle and Saskatoon only.
23. "Average wait time for admission to alcohol and drug long term residential treatment services" is applicable to Prairie North only.
24. Starting 2005/2006, the calculation methodology for the "Infant mortality rate", "Low birth weight rate" and "High birth weight rate" indicators changed from what was used previously. The time period also changed (three consecutive years, instead of five). Because these measures are calculated on a three-year basis, results are the same as those reported in 2005/2006.
25. Statistics Canada calculates this measure intermittently. The most recent is based on 2000 through 2002 death data and 2001 population estimates. Therefore, results are the same as those reported for 2005/2006.
26. Statistics Canada no longer calculates this measure (a similar measure, "Health Adjusted Life Expectancy (HALE)", exists but is not available at the regional level). Therefore, results are the same as those reported for 2004/2005 and 2005/2006.
27. Statistics Canada calculates this measure every 5 years, based on the latest census (2001). Therefore, results are the same as those reported for 2004/2005 and 2005/2006.
28. Starting 2005/2006, diabetes cases are determined using an enhanced version of the methodology (the prescription drug database is now used along with the hospital separations and physician services databases). Caution should be exercised if comparing results to those presented in the 2004/2005 summary. The age-sex-adjusted rates were calculated using 1996 Statistics Canada Census populations for Saskatchewan by sex and ten-year age groups.
29. Range values are based on data from final, unaudited financial statements.

MANAGEMENT REPORT

May 19, 2007

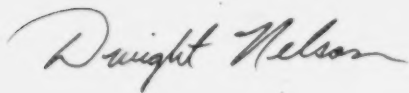
REGINA QU'APPELLE HEALTH REGION REPORT OF MANAGEMENT

The accompanying financial statements are the responsibility of management and are approved by the Regina Qu'Appelle Regional Health Authority. The financial statements have been prepared in accordance with Canadian Generally Accepted Accounting Principles and the Financial Reporting Guide issued by Saskatchewan Health, and of necessity include amounts based on estimates and judgments. The financial information presented in the annual report is consistent with the financial statements.

Management maintains appropriate systems of internal control, including policies and procedures, which provide reasonable assurance that the region's assets are safeguarded and the financial records are relevant and reliable.

The Authority delegates the responsibility of reviewing the financial statements and overseeing Management's performance in financial reporting to the Resource Accountability Committee. The Resource Accountability Committee meets with the Authority, Management and the external auditors to discuss and review financial matters and recommends the financial statements to the Authority for approval. The Authority approves the annual report and, with the recommendation of the Resource Accountability Committee, approves the financial statements.

The appointed auditor conducts an independent audit of the financial statements and has full and open access to the Resource Accountability Committee. The auditor's report expresses an opinion on the fairness of the financial statements prepared by Management.



Dwight Nelson
President and Chief Executive Officer



Carol Klassen
Vice President and Chief Financial Officer

Provincial Auditor Saskatchewan

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SASKATCHEWAN

AUDITOR'S REPORT

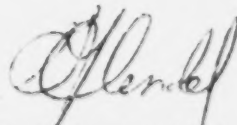
To the Members of the Legislative Assembly of Saskatchewan

I have audited the statement of financial position of the Regina Qu'Appelle Regional Health Authority as at March 31, 2007 and the statements of operations and changes in fund balances, and cash flows for the year then ended. These financial statements are the responsibility of the Authority's management. My responsibility is to express an opinion on these financial statements based on my audit.

I conducted my audit in accordance with Canadian generally accepted auditing standards. Those standards require that I plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In my opinion, these financial statements present fairly, in all material respects, the financial position of the Authority as at March 31, 2007 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Regina, Saskatchewan
May 10, 2007



Fred Wendel, CMA, CA
Provincial Auditor

2006-2007 FINANCIAL REPORT

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
FINANCIAL STATEMENTS

FOR THE YEAR ENDED MARCH 31, 2007

STATEMENT 1

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
As at March 31

STATEMENT OF FINANCIAL POSITION

	Restricted Funds					
	Operating Fund	Capital Fund	Community Trust Fund	Total 2007	Total 2006	
						(Note 16)
ASSETS						
CURRENT ASSETS						
Cash & short-term investments (Schedule 2)	\$ 1,338,471	\$ 8,883,835	\$ 822,075	\$ 11,044,381	\$ 8,568,711	
Accounts receivable						
Saskatchewan Health - General Revenue Fund	6,721,574	1,428,900	-	8,150,474	16,912,223	
Other	9,746,902	2,212,516	26,994	11,986,412	10,674,978	
Due to/from other funds	(16,817)	187,171	(170,354)	-	-	
Inventory (Note 2(e))	4,039,638	-	-	4,039,638	3,787,175	
Prepaid expenses	3,043,989	-	-	3,043,989	3,329,264	
	24,873,757	12,712,422	678,715	38,264,894	43,272,353	
Investments (Notes 2(f) & 14(c) & Schedule 2)	-	-	1,835,048	1,835,048	2,157,375	
Due from local governments (Note 5)	-	128,923	-	128,923	198,580	
Capital assets (Notes 2(d) and 3)	-	291,773,833	-	291,773,833	284,177,050	
TOTAL ASSETS	\$24,873,757	\$304,615,178	\$2,513,763	\$332,002,698	\$329,805,358	
LIABILITIES AND FUND BALANCE						
CURRENT LIABILITIES						
Bank overdraft (Note 14(d))	\$ -	\$ -	\$ -	\$ -	\$ 12,492,909	
Accounts payable	26,558,263	4,154,068	-	30,712,331	18,841,627	
Accrued salaries	13,196,875	-	-	13,196,875	27,938,881	
Long-term debt & mortgages - current (Note 5)	-	661,167	-	661,167	633,653	
Deferred revenue (Note 6)	10,015,356	-	-	10,015,356	6,487,128	
Accrued vacation pay	32,196,368	-	-	32,196,368	30,588,403	
	81,966,862	4,815,235	-	86,782,097	96,982,601	
Long-term debt & mortgages (Note 5)	-	5,783,042	-	5,783,042	6,434,824	
TOTAL LIABILITIES	81,966,862	10,598,277	-	92,565,139	103,417,425	
FUND BALANCES						
Invested in capital assets	-	285,329,624	-	285,329,624	277,108,573	
Externally restricted (Note 2(b)iii & Schedule 3)	-	284,890	2,513,763	2,798,653	2,899,262	
Internally restricted (Note 15 & Schedule 4)	-	553,534	-	553,534	591,028	
Unrestricted	(57,093,105)	7,848,853	-	(49,244,252)	(54,210,930)	
TOTAL FUND BALANCES	(57,093,105)	294,016,901	2,513,763	239,437,559	226,387,933	
TOTAL LIABILITIES & FUND BALANCES	\$24,873,757	\$304,615,178	\$2,513,763	\$332,002,698	\$329,805,358	

(See accompanying notes to the Financial Statements.)

STATEMENT 2

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
STATEMENT OF OPERATIONS AND CHANGES IN FUND BALANCES

For the year ended March 31

	Operating Fund			Restricted Funds			
	Budget 2007 (Note 12)	2007	2006 (Note 16)	Capital 2007	Community Trust 2007	Total 2007	Total 2006 (Note 16)
REVENUES							
Saskatchewan Health - General Revenue	\$ 580,492,643	\$580,069,038	\$545,443,305	\$ 19,053,623	\$ -	\$ 19,053,623	\$ 9,963,803
Other Provincial Revenue	4,683,560	5,280,519	4,355,521	224,517	-	224,517	259,383
Federal Government Revenue	4,827,950	5,743,179	5,041,253	-	-	-	-
Funding From Other Provinces	-	-	-	-	-	-	-
Special Funded Programs	4,332,988	4,408,156	4,352,110	-	-	-	-
Patient Fees	14,699,752	15,211,159	15,041,452	-	-	-	-
Out of Province Revenue	4,138,217	5,719,647	4,039,326	-	-	-	-
Out of Country Revenue	585,451	569,518	506,224	-	-	-	-
Donations	-	420,929	397,265	3,553,748	176,272	3,730,020	2,797,989
Investment Revenue	142,093	203,224	145,880	-	99,073	99,073	93,944
Ancillary Revenue	3,588,560	3,991,876	3,729,778	-	-	-	-
Recoveries	5,827,182	6,729,225	6,123,307	-	-	-	-
Other Revenue	6,337,971	6,289,862	6,114,927	4,010,262	-	4,010,262	321,712
	629,656,367	634,636,332	595,290,348	26,842,150	275,345	27,117,495	13,436,831
EXPENSES							
Province Wide Acute Care Services	48,814,269	47,532,571	46,362,740	4,679,592	-	4,679,592	4,383,481
Acute Care Services	303,148,205	299,281,424	286,134,305	11,623,411	17,028	11,640,439	10,020,252
Physician Compensation Acute	42,799,393	43,140,663	41,614,446	-	-	-	-
Supportive Care Services	107,956,713	109,980,724	101,805,436	1,004,452	41,052	1,045,504	1,496,440
Home Based Service	-	-	-	-	-	-	-
- Supportive Care	16,386,822	16,387,382	16,457,916	7,875	-	7,875	23,575
Population Health Services	16,141,234	15,637,213	14,648,864	48,698	-	48,698	71,292
Community Care Services	21,277,508	19,191,725	17,380,672	82,971	-	82,971	-
Home Based Services - Acute & Palliative	7,744,784	8,037,006	6,890,009	3,465	-	3,465	11,611
Primary Health Care Services	8,793,816	7,514,526	6,911,321	628,776	-	628,776	524,097
Emergency Response Services - RHA	9,754,142	9,581,648	9,249,740	253,136	-	253,136	188,181
Mental Health Services - Inpatient	8,614,251	8,505,442	8,145,138	-	-	-	-
Addictions Services - Residential	-	-	-	-	-	-	-
Physician Compensation Community	3,904,052	4,942,252	3,593,671	-	-	-	-
Program Support Services	29,577,247	32,047,081	29,131,316	3,424,568	-	3,424,568	2,580,471
Special Funded Programs	3,877,717	4,068,125	4,241,400	-	-	-	-
Ancillary	866,214	926,624	787,546	114,771	-	114,771	114,771
Total Expenses (Schedule 1)	629,656,367	626,774,406	593,354,520	21,871,715	58,080	21,929,795	19,414,171
Excess (Deficiency) of revenue over expenses	\$ -	7,861,926	1,935,828	4,970,435	217,265	5,187,700	(5,977,340)
Fund balances, beginning of year		(61,811,566)	(55,621,833)	285,469,066	2,730,433	288,199,499	286,051,278
Interfund transfers (Note 15)		(3,143,465)	(93,664)	3,577,400	(433,935)	3,143,465	93,664
Fund balances, end of year		\$(57,093,105)	\$(53,779,669)	\$294,016,901	\$2,513,763	\$296,530,664	\$280,167,602

(See accompanying notes to the Financial Statements.)

STATEMENT 3

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
STATEMENT OF CASH FLOW

For the year ended March 31

	Operating Fund		Restricted Fund			
	2007	2006	Capital	Community Trust	Total 2007	Total 2006
	(Note 16)		(Note 16)			
Cash provided by (used in):	Operating Activities		Financing and Investing Activities			
Excess (Deficiency) of revenues over expenses	\$ 7,861,926	\$ 1,935,829	\$ 4,970,435	\$ 217,265	\$ 5,187,700	\$(5,977,340)
Net change in non-cash working capital (Note 7)	16,804,825	(9,406,653)	(7,035,673)	(21,134)	(7,056,807)	2,904,920
Amortization of capital assets	-	-	21,275,277	-	21,275,277	18,301,850
Gain/(loss) on disposal of capital assets	-	-	-	-	-	-
	24,666,751	(7,470,824)	19,210,039	196,131	19,406,170	15,229,430
Purchase of capital assets	-	-	-	-	-	-
Buildings/construction	-	-	(16,123,664)	-	(16,123,664)	(4,453,671)
Equipment	-	-	(12,748,396)	-	(12,748,396)	(20,961,892)
Proceeds on disposal of capital assets	-	-	-	-	-	-
Buildings/construction	-	-	-	-	-	-
Equipment	-	-	-	-	-	-
Disposal (Purchase) of long-term investments	226,869	102,118	69,657	95,458	165,115	(647,648)
	226,869	102,118	(28,802,403)	95,458	(28,706,945)	(26,063,211)
Repayment of debt	-	-	(624,268)	-	(624,268)	(652,752)
Net increase (decrease) in cash & short-term investments during the year	24,893,620	(7,368,706)	(10,216,632)	291,589	(9,925,043)	(11,486,533)
Cash & short-term investments, beginning of year	(12,379,786)	(4,917,416)	7,491,169	964,421	8,455,590	19,848,459
Restatement of fund balances (Note 16)	(8,031,898)	-	8,031,898	-	8,031,898	-
Interfund transfers (Note 15)	(3,143,465)	(93,664)	3,577,400	(433,935)	3,143,465	93,664
Cash & short-term investments, end of year	\$ 1,338,471	\$(12,379,786)	\$ 8,883,835	\$ 822,075	\$ 9,705,910	\$ 8,455,590
Cash and cash equivalents						
Cash and short-term investments	1,338,471	113,123	8,883,835	822,075	9,705,910	8,455,590
Bank overdraft	-	(12,492,909)	-	-	-	-
	\$ 1,338,471	\$(12,379,786)	\$ 8,883,835	\$ 822,075	\$ 9,705,910	\$ 8,455,590

(See accompanying notes to the Financial Statements.)

SCHEDULE 1

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
SCHEDULE OF EXPENSES BY OBJECT

For the year ended March 31, 2007

	Budget 2007	2007	2006
Operating:			
Board costs	\$ 162,780	\$ 161,440	\$ 171,424
Compensation - Benefits	61,851,834	60,255,788	56,535,660
Compensation - Salaries	320,586,683	322,865,620	306,397,880
Diagnostic imaging supplies	1,839,491	1,561,895	1,542,035
Drugs	12,335,490	11,510,314	10,299,708
Food	4,855,703	4,901,137	4,786,368
Grants to ambulance services	2,071,686	2,074,122	1,990,097
Grants to third parties	64,298,893	65,250,387	61,829,398
Housekeeping and laundry supplies	2,374,288	2,259,068	2,025,468
Information technology contracts	3,258,030	3,401,694	2,616,780
Insurance	1,549,256	1,416,062	1,424,122
Interest	1,035,275	168,375	465,971
Laboratory supplies	5,405,749	5,390,370	4,877,782
Medical and surgical supplies	31,350,397	29,839,760	29,751,025
Medical remuneration and benefits	45,686,275	47,487,175	44,250,704
Office supplies and other office costs	3,780,812	3,689,919	3,810,060
Other	10,401,814	10,249,454	9,714,592
Other referred out services	415,014	396,349	408,621
Professional fees	10,999,267	11,187,398	10,745,803
Prosthetics	16,371,911	14,744,110	13,987,961
Purchased services	733,579	456,182	455,296
Rent/lease costs	3,649,790	3,851,065	3,904,532
Repairs and maintenance	8,795,920	8,289,538	7,743,086
Service contracts	1,170,947	1,137,826	995,698
Travel	3,468,754	3,606,199	3,210,779
Utilities	11,206,729	10,623,159	9,413,670
	\$ 629,656,367	\$ 626,774,406	\$ 593,354,520
Restricted			
Amortization	\$	21,275,277	\$ 18,301,840
Other		654,518	1,112,331
		\$ 21,929,795	\$ 19,414,171

SCHEDULE 2

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
SCHEDULE OF INVESTMENTS

For the year ending March 31, 2007

	Amount	Maturity	Effective Rate
Restricted			
Cash and Short-Term			
Chequing and Savings			
Cash	16,506		
Renaissance Money Market	7,761		
Talvest Money Market Fund	257,686		
Bank of Montreal Regina	8,883,835		
	9,165,788		
Investments			
Farm Credit Canada	17,000	15-Apr-07	3.50%
Government of Canada	225,000	1-Sep-07	4.50%
Farm Credit Canada	242,273	15-Nov-07	3.00%
CPN Province of British Columbia	19,509	9-Dec-07	
Equitable Trust - GIC	36,340	2-Jan-08	
	540,122		
Long-Term Investments			
Farm Credit Canada	318,445	15-Aug-08	4.25%
Canada Housing Trust	355,363	15-Sep-08	3.70%
Province of Alberta	18,237	16-Dec-08	5.00%
Municipal Finance of BC	35,610	6-Apr-09	3.85%
Province of Ontario	406,013	19-May-09	4.00%
Government of Canada - XT-69	93,123	1-Sep-09	4.25%
Canada Housing Trust	15,136	15-Sep-09	4.65%
Province of Ontario	35,821	19-May-10	4.00%
Saskatchewan Savings Bonds	557,300	15-Jul-11	4.00%
	1,835,048		
Total Restricted Investments	11,540,958		
Unrestricted			
Cash and Short-Term			
Cash on Hand	61,212		
Petty Cash	51,243		
Bank of Montreal	753,540		
Broadview Credit Union	5,506		
Canadian Imperial Bank of Commerce	123,880		
Cornerstone Credit Union	1,645		
Farm Credit Corporation	187,350	15-Feb-08	4.50%
Raymore Credit Union	1,321		
RBC Dominion Securities	5		
Royal Bank	32,071		
Toronto-Dominion Bank	120,698		
	1,338,471		
Total Unrestricted Investments	1,338,471		
Cash & short-term investments	11,044,381		
Investments	1,835,048		
	12,879,429		

SCHEDULE 3

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
SCHEDULE OF EXTERNALLY RESTRICTED FUNDS

For the year ended March 31, 2007

	Balance Beginning of Year	Investment & Other Revenue	Donations	Expenses	Transfer to investment in capital asset	Balance End of Year
Capital Fund						
Balcarres Care Centre	\$ 66,403	\$ -	\$ 8,892	\$ 1,450	\$ 5,391	\$ 68,454
Echo Lodge	36,891	-	9,003	1,671	2,100	42,123
Home Care	4,647	-	605	840	-	4,412
Saskatchewan Health Construction	51,421	-	-	-	51,421	-
Silver Heights Special Care Home	5,253	9,291	10,555	7,235	3,114	14,750
St. Joseph's Care Centre	4,214	-	2,993	307	1,081	5,819
Wascana Rehab Centre	-	180,000	-	-	30,668	149,332
	168,829	189,291	32,048	11,503	93,775	284,890
Community Trust Fund						
Balcarres Integrated Care Centre	103,432	2,601	-	30,500	-	75,533
Broadview Centennial Lodge	315,546	12,267	1,710	(64)	93,000	236,587
Broadview Union Hospital	358,862	14,380	1,525	281	262,000	112,486
District Office	1,280	-	-	-	-	1,280
Eastern Saskatchewan Pioneer Lodge	(5,484)	-	-	-	(5,459)	(25)
Golden Prairie Home	446,580	18,166	923	428	-	465,241
Grenfell Area	531,738	15,898	2,454	-	-	550,090
Home Care	6,675	-	-	-	-	6,675
Indian Head Hospital	23,424	4,343	28,234	16,747	27,895	11,359
Lakeside Home	12,139	-	830	-	-	12,969
Montmartre Health Centre	82,326	2,937	10	-	-	85,273
Moosomin Union Hospital	126,696	4,985	2,650	-	16,578	117,753
St. Joseph's Integrated Care Centre	178,355	6,650	-	9,419	5,860	169,726
Whitewood Health Centre	90,928	1,681	27,654	770	(1,094)	120,587
Wolseley Memorial Hospital	457,937	15,165	110,282	-	35,155	548,229
	2,730,434	99,073	176,272	58,081	433,935	2,513,763
Total Externally Restricted Funds	\$ 2,899,263	\$ 288,364	\$ 208,320	\$ 69,584	\$ 527,710	\$ 2,798,653

SCHEDULE 4

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
SCHEDULE OF INTERNALLY RESTRICTED FUND BALANCES

For the year ended March 31, 2007

	Balance Beginning of Year	Investment Income Allocation	Annual SHC Allocation	Expense	Investment in Capital	Balance End of Year
Balcarres Integrated Care Centre	\$ 108,000	\$ -	\$ -	\$ -	\$ -	\$ 108,000
Broadview & District Centennial Lodge	34,009	-	9,405	-	-	43,414
Eastern Saskatchewan Pioneer Lodge	41,633	-	15,400	-	-	57,033
Echo Lodge	109,554	-	32,830	-	-	142,384
Golden Prairie Home	127,369	-	(11,579)	-	-	115,790
Grenfell Pioneer Home	99,000	-	(83,142)	15,858	-	-
Silver Heights	68,495	-	7,750	-	-	76,245
Whitewood Community Health Centre	2,968	-	7,700	-	-	10,668
	\$ 591,028	\$ -	\$ (21,636)	\$ 15,858	\$ -	\$ 553,534

The RHA is required to maintain certain replacement reserves as a condition of receiving subsidy assistance from Saskatchewan Housing Corporation. The above schedule shows the changes in these reserve balances during the year.

SCHEDULE 5

REGINA QU'APPELLE REGIONAL HEALTH AUTHORITY
CONSOLIDATED SCHEDULES OF BOARD REMUNERATION

For the year ending March 31, 2007

Board Members	Retainer	Per Diem	Travel Time Expenses	Travel & Other Sustenance Expenses	Other Expenses	CPP	2007 Total	2006 Total
Chairperson								
Knuttila, M.	\$ 10,972	\$ 13,237	\$ 1,850	\$ 1,463	\$ 2,643	\$ 1,076	\$ 31,241	\$ 33,643
Board Members								
Bergman, A.	-	5,725	1,775	1,759	2,409	-	11,668	15,128
Boutilier, L.	-	4,600	800	452	2,495	108	8,455	10,511
Connolly, P.	-	8,337	4,994	5,247	1,435	487	20,500	19,079
Elford, L.	-	7,275	875	743	2,875	230	11,998	14,390
Everett, M.	-	8,400	5,506	4,171	9,459	423	27,959	24,310
Fisher, T.	-	5,325	900	527	1,573	135	8,460	9,494
Leier, B.	-	4,475	975	599	1,724	154	7,927	11,410
Poitrass, B.	-	3,750	1,088	1,159	509	83	6,589	9,209
Semenchuck, G.	-	2,850	325	210	281	(3)	3,663	4,429
Taylor, A.	-	5,725	450	629	1,046	-	7,850	7,786
Ward, C.	-	6,600	2,600	3,214	844	-	13,258	12,535
	\$ 10,972	\$ 76,299	\$ 22,138	\$ 20,173	\$ 27,293	\$ 2,693	\$ 159,568	\$ 171,924

SCHEDULE 5 CONTINUED

SENIOR MANAGEMENT SALARIES, BENEFITS, ALLOWANCES AND SEVERANCE

For the year ending March 31, 2007

Senior Employees	2007					2006		
	Salaries ¹	Benefits & Allowances ²	Sub-total	Severance Amount	Total	Salaries, Benefits & Allowances ^{1,2}	Severance	Total
Dwight Nelson, President & CEO	\$ 273,315	\$ 2,016	\$ 275,331	\$ -	\$ 275,331	\$ 270,640	\$ -	\$ 270,640
Tania Diener, Regional Medical Health Officer	235,714	6,066	241,780	-	241,780	236,393	-	236,393
Patrick Dumelie, Senior Vice President, Health Services	85,279	2,533	87,812	-	87,812	180,538	-	180,538
Brian Laursen, Senior Vice President, Medical Services	170,107	6,666	176,773	-	176,773	153,099	-	153,099
Carol Klassen, Vice President, Corporate Services	143,017	4,866	147,883	-	147,883	139,515	-	139,515
Jane Lindstrom, Vice President, Human Resources	150,291	4,866	155,157	-	155,157	135,459	-	135,459
David Ahmed, Vice President, Medical Services	112,655	3,666	116,321	-	116,321	112,042	-	112,042
Donna Evans, Vice President, Operations Support	143,427	3,666	147,093	-	147,093	137,487	-	137,487
John Labatt, Vice President, Primary Health Care	69,557	1,528	71,085	-	71,085	135,054	-	135,054
Susan Neville, Vice President, Restorative & Continuing Care	143,443	4,866	148,309	-	148,309	135,054	-	135,054
Diane Larrivee, Vice President, Specialty Care	143,443	4,866	148,309	-	148,309	135,054	-	135,054
Keith Dewar, Senior Vice President, Health Services	38,621	1,516	40,137	-	40,137	-	-	-
Dawn McNeil, Acting Vice President, Primary Health Care	62,033	3,333	65,366	-	65,366	-	-	-
Michael Redenbach, Vice President, Primary Health Care	9,732	505	10,237	-	10,237	-	-	-
	\$ 1,780,634	\$ 50,959	\$ 1,831,593	\$ -	\$ 1,831,593	\$ 1,770,335	\$ -	\$ 1,770,335

¹ Salaries include regular base pay, overtime, honoraria, sick leave, vacation leave, and merit or performance pay, lumpsum payments, and any other direct cash remuneration.

² Benefits and allowances include the employer's share of amounts paid for the employees' benefits and allowances that are taxable to the employee. This includes: professional development, education for personal interest, non-accountable relocation benefits, personal use of an automobile, cell phone, computer, etc., as well as any other taxable benefits.

NOTES TO THE FINANCIAL STATEMENTS

MARCH 31, 2007

1. LEGISLATIVE AUTHORITY

On August 1, 2002 the Legislative Assembly passed *The Regional Health Services Act* (the Act). This Act created the Regional Health Authorities for the purpose of governing the delivery of health services as well as establishing and governing Health Regions in the province of Saskatchewan.

The Regina Qu'Appelle Regional Health Authority (RHA) was created by the Act and is responsible for the planning, organization, delivery, and evaluation of health services it is to provide within the geographic area known as Regina Qu'Appelle Health Region under section 27 of the Act.

The Regina Qu'Appelle Regional Health Authority is a non-profit organization and is not subject to income and property taxes from federal, provincial and municipal levels of government.

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements are prepared in accordance with Canadian generally accepted accounting principles and include the following significant accounting policies.

a. Health Care Organizations

- i) The RHA has agreements with and grants funding to the following CBO's and third parties to provide health services:

615672 Saskatchewan Ltd. (Touchwood EMS)	Milestone Assisted Living Advisory Board
Autism Resource Centre Inc.	Mobile Crisis Services, Inc.
Backlin's Ambulance Service Ltd.	Phoenix Residential Society Inc.
Care for the Core	Pilot Butte Community Association
Cosmopolitan Activity Centre	Pipestone Qu'Appelle Association for Community Living
Council on Social Development Regina Inc.	Planned Parenthood Regina
Cupar Lions Volunteer Ambulance	Prairie Ambulance Care (1998) Ltd.
Extendicare (Canada) Inc.	Rainbow Youth Centre Inc.
Family Leadership Connection	Raymore Community Health and Social Centre
Global Regina	Red Cross
RQHR Home Care	Regina Recovery Homes Inc.
Imperial & District Ambulance	Regina Community Clinic
JT Ambulance Service Ltd.	Salvation Army Waterston Centre
Ka Pa Chee Training Centre	Soo Line Ambulance
Living Sky Ambulance	Tisher Family Daycare
Lumsden & Craven Seniors' Program Inc.	University of Regina
Mental Health Association/Regina Branch Inc.	Valley Ambulance Care Ltd.

Note 9.b.i. provides disclosure of payments to CBOs and third parties.

- ii) The following affiliates are incorporated as follows (and are registered charities under *The Income Tax Act*)

All Nations' Healing Hospital Inc.	The Qu'Appelle Diocesan Housing Company
Cupar and District Nursing Home Inc.	The Regina Lutheran Housing Corporation
Lumsden & District Heritage Home Inc.	The Salvation Army William Booth Special Care Home
Pioneer Village Special Care Corporation	Santa Maria Senior Citizens Home Inc.

The RHA provides annual grant funding to these organizations for the delivery of health care services. Consequently, the RHA has disclosed certain financial information regarding these affiliates.

These affiliates are not consolidated into the RHA financial statements. Alternately, Note 9.b.ii. provides supplementary information on the financial position, results of operations, and cash flows of the affiliates.

- iii) The Hospitals of Regina Foundation (the Foundation) is a non-controlled not-for-profit entity that raises funds for programs and equipment for facilities under the Regina Qu'Appelle Health Region. The Foundation is incorporated under the *Non-Profit Corporations Act* and is a registered charity under *The Income Tax Act*.

The activities of the Foundation are not consolidated into the RHA financial statements. Alternately, Note 9.b.iii. provides supplementary information on the financial position, results of operations, and cash flows of the Foundation.

B. Fund Accounting

The accounts of the RHA are maintained in accordance with the restricted fund method of accounting for contributions. For financial reporting purposes, accounts with similar characteristics have been combined into the following major funds:

i) Operating Fund

The operating fund reflects the primary operations of the RHA including revenues received for provision of health services from Saskatchewan Health - General Revenue Fund, and billings to patients, clients, the federal government and other agencies for patient and client services. Other revenue consists of donations, recoveries and ancillary revenue. Expenses are for the delivery of health services.

ii) Capital Fund

The capital fund is a restricted fund that reflects the equity of the RHA in capital assets after taking into consideration any associated long-term debt. The capital fund includes revenues received from Saskatchewan Health - General Revenue Fund designated for the construction of capital projects and/or the acquisition of capital assets. The capital fund also includes donations designated for capital purposes by the contributor. Expenses consist primarily of amortization of capital assets.

iii) Community Trust Fund

The community trust fund is a restricted fund that reflects community generated assets transferred to the RHA in accordance with the pre-amalgamation agreements signed with the amalgamating health corporations. The assets include cash and investments initially accumulated by the health corporations in the RHA from donations or municipal tax levies. These assets are accounted for separately and use of the assets is subject to restrictions set out in pre-amalgamation agreements between the RHA and the health corporations.

C. Revenue

Unrestricted contributions are recognized as revenue in the Operating Fund in the year in which they are received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Restricted contributions related to general operations are recorded as deferred revenue and recognized as revenue of the Operating Fund in the year in which the related expenses are incurred. All other restricted contributions are recognized as revenue of the appropriate restricted fund in the year.

d. Capital Assets

Capital assets are recorded at cost. Normal maintenance and repairs are expensed as incurred. Capital assets, with a life exceeding one year, are amortized on a straight-line basis over their estimated useful lives as follows:

Buildings	-	2 1/2% to 6 2/3%
Leasehold improvements	-	2 1/2% to 20%
Equipment	-	5% to 30%

Donated capital assets are recorded at their fair value at the date of contribution.

e. Inventory

Inventories consist of general stores, pharmacy and linen. All inventories are valued at cost. Cost of general stores and linen inventory is determined on a weighted average basis. Pharmacy inventory cost is determined on the first in, first out basis.

f. Investments

Investments are valued at the lower of cost and net realizable value.

g. Pension

Employees of the RHA participate in several multi-employer defined benefit pension plans or a defined contribution plan. The RHA follows defined contribution plan accounting for its participation in the plans. Accordingly the RHA expenses all contributions it is required to make in the year.

h. Measurement Uncertainty

These financial statements have been prepared by management in accordance with Canadian generally accepted accounting principles. In the preparation of financial statements, management makes various estimates and assumptions in determining the reported amounts of assets and liabilities, revenues and expenses and in the disclosure of commitments and contingencies. Changes in estimates and assumptions will occur based on the passage of time and the occurrence of certain future events. The changes will be reported in earnings in the period in which they became known.

3. CAPITAL ASSETS

	March 31, 2007			March 31, 2006
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Land	\$ 6,040,741	\$ -	\$ 6,040,741	\$ 4,583,102
Land & Leasehold Improvements	4,811,817	3,272,833	1,538,984	1,467,047
Buildings	358,210,898	144,486,783	213,724,115	220,364,599
Equipment	222,427,232	166,389,054	56,038,178	55,047,915
Construction in progress	14,431,815	-	14,431,815	2,714,387
	<u>\$ 605,922,503</u>	<u>\$ 314,148,670</u>	<u>\$ 291,773,833</u>	<u>\$ 284,177,050</u>

4. COMMITMENTS

a. Capital Asset Acquisitions

At March 31, 2007, commitments for acquisitions of capital assets were \$7,834,776 (2006 - \$5,816,310).

b. Operating Leases

Minimum annual rentals under operating leases on property and equipment over the next five years are as follows:

2007-2008	\$ 1,828,537
2008-2009	1,554,914
2009-2010	912,569
2010-2011	588,203
2011-2012	543,625

5. MORTGAGES AND LOANS PAYABLE

	Interest Rate	Repayment Terms	C.M.H.C. Subsidy	2007	2006
Whitewood Community Health Centre					
CMHC Due December 2013	5.140%	\$ 99,851 principal & interest	31,635	\$ 931,030	\$ 982,098
Eastern Saskatchewan Pioneer Lodge					
CMHC Due October 2017	5.875%	\$ 10,814 principal & interest		85,355	91,034
CMHC Due October 2024	8.000%	\$ 10,131 principal & interest		96,323	98,768
Golden Prairie Home					
CMHC Due December 2013	5.140%	\$ 61,132 principal & interest	19,756	606,126	635,605
CMHC Due May 2024	7.625%	\$ 18,687 principal & interest		180,046	185,013
Broadview & District Centennial Lodge					
CMHC Due April 2008	4.580%	\$ 143,294 principal & interest	34,095	151,192	284,711
Silver Heights Special Care Home					
CMHC Due March 2013	5.380%	\$ 49,785 principal & interest	57,843	624,764	640,833
Parkland Lodge					
CMHC Due April 2015	8.000%	\$ 17,221 principal & interest		102,779	111,534
Echo Lodge					
CMHC Due September 2012	5.520%	\$ 59,166 principal & interest	21,089	615,777	640,589
CMHC Due January 2023	7.500%	\$ 3,243 principal & interest		30,221	31,193
CMHC Due January 2018	5.875%	\$ 10,688 principal & interest		85,811	91,343
Medical Office Building					
Bank of Montreal - demand loan	5.625%	\$ 373,287 principal & interest		2,650,781	2,869,876
Local Governments					
Pacific & Western - Due September 2008	6.560%	\$ 69,364 principal & interest		102,582	163,330
Fort Qu'Appelle Regional Office					
Pacific & Western - Due November 2009	6.627%	\$ 75,070 principal & interest		181,422	242,550
				\$ 6,444,209	\$ 7,068,477
		Less: Current portion		661,167	633,653
				<u>\$ 5,783,042</u>	<u>\$ 6,434,824</u>

For each of the mortgages, the RHA has pledged the related buildings of the special care homes as security. Security for the loans was given in the form of promissory notes, general security agreements, assignments of fire insurance and board resolutions.

The RHA assumed responsibility for a loan agreement with Pacific and Western Trust, which was made on behalf of local governments that committed funds for the construction of the Balcarres Integrated Care Centre. The local governments provided signed agreements for the annual payment of their portion of the loan. The balance owing from local governments is \$128,923 (2006 - \$198,580).

The Medical Office Building demand loan was to finance the construction of the Medical Office Building. This project is considered to be self-financing over a 20-year period and the loan is secured through assignment of rent receipts. Interest is at bank prime less 0.375 per cent. There is a remaining twelve-year amortization on this loan.

Principal repayments required in each of the next five years are estimated as follows:

2007-2008	\$	661,167
2008-2009		531,259
2009-2010		483,481
2010-2011		461,793
2011-2012		487,957
2012 & subsequent		3,818,551

6. DEFERRED REVENUE

	Balance Beginning of Year	Less Amount Recognized	Add Amount Received	Balance End of Year
Sask Health Initiatives				
Aboriginal Awareness	\$ 123,215	\$ 76,095	\$ -	\$ 47,120
Aboriginal Awareness	-	-	74,640	74,640
Aboriginal Awareness GRAA				
Representative Workforce	8,700	4,000	-	4,700
Children's MH: Outreach Services	-	-	18,051	18,051
Children's MH: Respite Services	-	-	18,051	18,051
Cognitive Disabilities Enhancement	62,804	240,082	371,830	194,552
Cognitive Disabilities Medical Diagnostic Services	24,438	119,438	95,000	-
Computers Sask Immunization	24,000	15,217	-	8,783
Continuing Education & Professional Development	-	19,583	68,540	48,957
Diabetes Plan	65,218	52,427	60,000	72,791
Diabetic Foot Program	796	1,000	204	-
Dialysis Therapy Support Project	-	36,951	60,000	23,049
Drug Treatment Court	-	501,442	567,333	65,891
Enhanced Needle Exchange	22,000	2,010	-	19,990
EPI & Distance Consultant - C&Y	-	38,500	285,330	246,830
ER Streaming	-	-	788,000	788,000
Facility Assessment Audits	-	-	550,000	550,000
Fitness Centre at RGH	15,000	12,707	-	2,293
Frontline Professional Development	69,742	31,545	-	38,197
Harassment Workshop	25,000	25,000	-	-
Health Promotion Strategy	2,386	2,386	-	-
HealthLine	321,812	3,357,307	3,250,000	214,505
HealthLine - Nurses Training	-	-	32,000	32,000
Hearing Aid Employees Exam	-	-	900	900
HIV Case Management Project 07/08	-	-	40,000	40,000

	Balance Beginning of Year	Less Amount Recognized	Add Amount Received	Balance End of Year
6. DEFERRED REVENUE CONTINUED				
IDU Outreach & Needle Exchange	-	-	10,000	10,000
Implementation Resources 05/06	-	1,890	66,667	64,777
Implementation Resources 06/07	-	-	66,667	66,667
Improving Effectiveness of Leadership	75,000	34,006	-	40,994
IRCS/YCJA	62,643	73,232	124,325	113,736
Leadership Reporting Tools	47,080	-	-	47,080
Leading Thunderbird Lodge	-	-	800,000	800,000
Manager's Electronic Toolkit	28,180	-	-	28,180
MDS Home Care	102,681	12,324	-	90,357
Medical Remuneration Issues	500,000	-	-	500,000
Mental Health Promotion	-	114,810	119,361	4,551
MHA - HealthLine	-	101,400	231,394	129,994
Midwifery Services	-	18,449	143,000	124,551
Musculoskeletal Clinic Project	351,000	10,896	-	340,104
Needle Exchange	-	-	15,000	15,000
North Central Shared Facility	-	5,146	250,000	244,854
Nursing Standards Council	81,181	12,907	-	68,274
Outreach for YDDS - Project Hope	-	58,565	80,000	21,435
Pilot Project Patient Streaming	-	-	300,000	300,000
Preceptorship Training	17,073	17,073	-	-
Primary Health Care Initiatives	86,116	353,904	314,929	47,141
Primary Health Care Victoria Square Medical Clinic	40,000	-	85,000	125,000
Primary Health Services	15,000	-	-	15,000
Promotion of HealthLine	-	-	10,000	10,000
Provincial Diabetes Plan	-	-	45,000	45,000
Quality Health Workplace Initiatives	283,228	465,348	208,382	26,262
Quality Workplace Initiatives	-	8,540	68,540	60,000
Recruitment/Retention Strategy	20,000	15,161	-	4,839
Research Project Nurses' Turnover	26,350	9,065	-	17,285
RN(NP) 4 Directions Community Health	-	40,436	75,000	34,564
Short Term Acute HC	133,000	126,617	266,798	273,181
Surgical Access Manager	75,009	75,009	-	-
Surgical Initiatives Fund	140,000	113,572	-	26,428
TRL (MSI) Coordinator	70,000	16,855	-	53,145
Twin Valleys PH Site	-	354,077	393,916	39,839
Vaccination Programs	-	-	20,000	20,000
Visudyne	-	-	9,000	9,000
Workplace Accommodation Workshop	6,500	-	-	6,500
Workshop Series for Managers, Leaders	10,921	-	-	10,921
Youth Outpatient & Outreach - Project Hope	-	109,358	110,000	642
Youth Outreach Services	-	-	50,000	50,000
Total Sask Health	\$ 2,936,073	\$ 6,684,330	\$ 10,142,858	\$ 6,394,601
Non Sask Health Initiatives				
Acquired Brain Injury Program	\$ 150,230	\$ 1,385,372	\$ 1,255,757	\$ 20,615
Education Funds	136,866	133,607	111,004	114,263
Kids First	183,250	3,164,412	3,066,955	85,793
Research Grants	1,136,111	546,563	652,910	1,242,458
Medical Earnings Pool	478,643	124,355	27,905	382,193
Other	1,465,954	1,037,696	1,347,175	1,775,433
Total Non Sask Health	\$ 3,551,054	\$ 6,392,005	\$ 6,461,706	\$ 3,620,755
Total Deferred Revenue	\$ 6,487,127	\$ 13,076,335	\$ 16,604,564	\$ 10,015,356

7. NET CHANGE IN NON-CASH WORKING CAPITAL

	Operating Fund		Restricted Funds			
	2007	2006	Capital Fund	Community Trust Fund	Total 2007	Total 2006
(Increase) Decrease in accounts receivable	\$ 15,840,513	\$ (18,613,743)	\$ (8,369,064)	\$ (21,134)	\$ (8,390,198)	\$ 2,385,243
(Increase) Decrease in inventory	(252,463)	(266,865)	-	-	-	-
(Increase) Decrease in prepaid expenses	285,275	568,720	-	-	-	-
Increase (Decrease) in accounts payable	10,537,313	(9,701,462)	1,333,391	-	1,333,391	519,677
Increase (Decrease) in accrued salaries	(14,742,006)	14,058,094	-	-	-	-
Increase (Decrease) in vacation payable	1,607,965	4,016,745	-	-	-	-
Increase (Decrease) in deferred revenue	3,528,228	531,858	-	-	-	-
	<u>\$ 16,804,825</u>	<u>\$ (9,406,653)</u>	<u>\$ (7,035,673)</u>	<u>\$ (21,134)</u>	<u>\$ (7,056,807)</u>	<u>\$ 2,904,920</u>

8. CONTINGENT LIABILITY

a. City of Regina

A statement of claim dated January 17, 2003 was filed by the Administrative Board of the Regina Civic Employees' Long-Term Disability Plan, the Administrative Board of the Regina Civic Employees' Superannuation and Benefit Plan and the City of Regina as Plaintiffs against the Regina Qu'Appelle Regional Health Authority, Saskatchewan Association of Health Organizations, Health Sciences Association of Saskatchewan and Saskatchewan Union of Nurses as Defendants. The dispute is in relation to the two respective pension and long-term disability plans.

The Discovery Stage of the process has been completed and the Region is waiting for a date for the court application.

b. Joint Job Evaluation Reconsideration

The joint job evaluation/pay equity initiative for the service provider unions CUPE, SEIU, and SGEU allowed for an appeal process. As a result, employees and employers have filed reconsideration appeals that are currently under review. A financial obligation to pay reconsideration costs occurs once the Steering Committee reviews the recommendations from the Reconsideration Committee and reaches a consensus decision. At this time there are outstanding reconsiderations on which the Steering Committee has yet to reach a final decision. The results of outstanding reconsiderations are currently unknown therefore the cost of these reconsiderations cannot be reasonably determined.

9. RELATED PARTIES

a. Related Party Transactions

These financial statements include transactions with related parties. The RHA is related to all Saskatchewan Crown Agencies such as departments, corporations, boards and commissions under the common control of the Government of Saskatchewan. The RHA is also related to non-Crown enterprises that the Government jointly controls or significantly influences. In addition, the RHA is related to other non-Government organizations by virtue of its economic interest in these organizations.

Transactions with these related parties are in the normal course of operations. Amounts due to or from and the recorded amounts of transactions resulting from these transactions are included in the financial statements and the table below. They are recorded at standard rates charged by those organizations and are settled on normal trade terms.

	2007	2006
Revenues		
Department of Community Resources	\$ 82,128	\$ 82,128
Department of Culture, Youth & Recreation	98,914	103,243
Department of Learning	3,230,411	3,207,389
Health Quality Council	100,924	290,925
Saskatchewan Cancer Foundation	2,113,272	1,718,213
Saskatchewan Health Information Network Corporation	388,221	79,118
Saskatchewan Housing Corporation	164,417	199,383
SGL Canada Insurance Services Ltd.	3,716,183	2,634,811
Workers' Compensation Board	2,405,923	2,265,469
	<u>\$ 12,300,393</u>	<u>\$ 10,580,679</u>
Expenditures		
Department of Finance	\$ 1,983,561	\$ 1,180,186
Saskatchewan Association of Health Organizations	15,920,820	12,972,206
Saskatchewan Healthcare Employees' Pension Plan	15,003,895	12,959,970
Saskatchewan Institute Applied Science & Technology	125,244	71,968
Saskatchewan Power	5,116,084	4,192,725
Saskatchewan Telecommunications	1,713,485	2,080,011
SaskEnergy Incorporated	233,214	203,095
SGL Canada Insurance Services Ltd.	36,485	33,738
Workers' Compensation Board	6,720,065	6,424,881
	<u>\$ 46,852,853</u>	<u>\$ 40,118,780</u>
Accounts Receivable		
Saskatchewan Aids for Independent Living	\$ 357,639	\$ 133,582
Saskatchewan Cancer Foundation	991,577	954,204
Saskatchewan Drug Plan	597,683	265,577
Saskatchewan Health Information Network Corporation	167,339	200,000
SGL Canada Insurance Services Ltd.	291,040	436,000
Workers' Compensation Board	647,318	552,018
	<u>\$ 3,052,596</u>	<u>\$ 2,541,381</u>
Prepaid Expenditures		
Saskatchewan Association of Health Organizations	\$ 144,060	\$ 150,435
Workers Compensation	-	1,493,272
	<u>\$ 144,060</u>	<u>\$ 1,643,707</u>
Accounts Payable		
Department of Finance	\$ 404,169	\$ 1,007,154
Saskatchewan Association of Health Organizations	1,063,247	261,360
Saskatchewan Healthcare Employees' Pension Plan	3,041,955	-
Saskatchewan Power	438,715	410,840
Saskatchewan Telecommunications	592,800	201,913
SaskEnergy Incorporated	21,051	29,077
Workers' Compensation Board	1,621,620	-
	<u>\$ 7,183,557</u>	<u>\$ 1,910,344</u>

In addition, the RHA pays Provincial Sales Tax to the Saskatchewan Department of Finance on all its taxable purchases. Taxes are recorded as part of the cost of those purchases.

b. Health Care Organizations
Community Based Organizations and Third Parties

The RHA has also entered into agreements with CBOs and Third Parties to provide health services.

These organizations receive operating funding from the RHA in accordance with budget amounts approved annually. During the year, the RHA provided the following amounts to CBOs and Third Parties:

	2007	2006
	\$	\$
615672 Sask Ltd. (Touchwood EMS)	348,947	326,646
Autism Resource Centre	400,667	329,081
Backlin's Ambulance Service Ltd.	433,212	427,732
Cosmopolitan Activity Centre	30,654	29,475
Cupar Lions Volunteer Ambulance	183,215	171,341
Extencicare (Canada) Inc.	18,270,882	16,493,779
Imperial & District Ambulance	83,805	84,208
JT Ambulance Service Ltd.	292,216	289,774
Living Sky Ambulance	17,064	17,064
Lumsden & Craven Seniors' Program Inc.	28,550	24,000
Mental Health Association/Regina Branch Inc.	383,600	368,168
Milestone Assisted Living Advisory Board	34,000	26,050
Mobile Crisis Services, Inc.	91,325	87,650
Phoenix Residential Society	1,004,689	964,274
Pipestone Qu'Appelle Assoc for Community Living	12,000	12,000
Planned Parenthood Regina	122,898	122,898
Prairie Ambulance Care (1998) Ltd.	237,112	233,190
Rainbow Youth Centre	176,479	169,379
Raymore Community Health & Social Centre	45,000	45,000
Regina Community Clinic	37,271	-
Red Cross	130,000	130,000
Regina Recovery Homes Inc.	1,495,699	1,435,526
Salvation Army Waterston Centre	176,378	161,662
Soo Line Ambulance	145,838	98,473
Tisher Family Daycare	32,322	-
University of Regina	67,336	62,336
Valley Ambulance Care Ltd.	332,713	325,919
Miscellaneous Grants	26,697	1,692
	<u>\$ 24,640,569</u>	<u>\$ 22,437,317</u>

ii. Affiliates

The Act makes the RHA responsible for the delivery of health services in its region including the health services provided by privately owned affiliates. The Act requires affiliates to conduct their affairs and activities in a manner that is consistent with, and that reflects, the health goals and objectives established by the RHA. The following presentation discloses the amount of funds granted to each affiliate:

	2007	2006
Affiliate Retro, Ehn Hlth & Ehn Dental, JJE, OOS	\$ -	\$ 3,055,186
All Nations' Healing Hospital Inc	2,961,352	2,648,233
Cupar & District Nursing Home Inc.	2,068,838	1,913,168
Lumsden & District Heritage Home Inc.	1,674,240	1,540,614
Pioneer Village Special Care Corporation	1,010,917	17,061,917
The Qu'Appelle Diocesan Housing Corporation	3,887,405	854,129
The Regina Lutheran Housing Corporation	19,128,388	3,500,531
The Salvation Army William Booth Special Care Home	6,759,543	4,719,553
Santa Maria Senior Citizens Home Inc.	5,193,256	6,088,848
	<u>\$ 42,683,939</u>	<u>\$ 41,382,179</u>

Saskatchewan Health requires additional reporting in the following financial summaries of the affiliate entities as at March 31, 2006 and 2005 and for the years then ended:

	2006	2005
Balance Sheet		
Assets	\$ 10,947,799	\$ 11,093,185
Net Capital Assets	23,276,581	23,053,938
Total Assets	<u>\$ 34,224,380</u>	<u>\$ 34,147,123</u>
Total Liabilities	\$ 17,335,821	\$ 17,155,973
Total Net Assets (Fund Balances)	<u>16,888,559</u>	<u>16,991,150</u>
	<u>\$ 34,224,380</u>	<u>\$ 34,147,123</u>
Results of Operations		
RHA Grant	\$ 39,368,369	\$ 37,095,358
Other Revenue	11,961,781	12,191,161
Total Revenue	<u>51,330,150</u>	<u>49,286,519</u>
Salary & Benefits	44,021,594	41,691,433
Other Expenses*	7,366,273	7,195,998
Total Expenses	<u>51,387,867</u>	<u>48,887,431</u>
Excess (Deficiency) of revenue over expenses	<u>\$ (57,717)</u>	<u>\$ 399,088</u>
* Other Expenses includes amortization of \$459,026 (2005 -\$441,200)		
Cash Flows		
Cash from Operations	\$ 624,792	\$ 445,864
Cash used in Financing Activities	(263,752)	327,571
Cash used in Investing Activities*	<u>(841,729)</u>	<u>(538,653)</u>
Increase (Decrease) in Cash	<u>\$ (480,689)</u>	<u>\$ 234,782</u>

* Cash used in Investing Activities includes capital purchases of \$802,520 (2005 -\$611,031)

iii. Fund Raising Foundation

The Hospitals of Regina Foundation Inc. is an independent non-profit corporation without share capital that has its own Board of Directors. It provides donations to the RHA for capital equipment, education and research purposes. Its accounts are not included in these financial statements. As of December 31, 2006 it has net assets of \$15,602,956 (2005 - \$13,104,294). During the year, the Foundation provided funding of approximately \$4,321,410 (March 31, 2006 - \$2,547,230) for programs and capital acquisitions reported in donations and ancillary income. These amounts were used to fund capital assets, education and research projects at the Regina General Hospital, the Pasqua Hospital and the Wascana Rehabilitation Centre.

	December 31, 2006	December 31, 2005
Balance Sheet		
Total Assets	\$ 19,700,359	\$ 16,050,470
Total Liabilities	4,097,403	2,946,176
Total Net Assets (Fund Balances)*	15,602,956	13,104,294
	<u>\$ 19,700,359</u>	<u>\$ 16,050,470</u>

* In accordance with donor-imposed restrictions \$4,078,909 (2005 - \$2,465,382) of the foundation's net assets must be used to purchase specialized equipment.

Results of Operations

Other Revenues	\$ 8,086,512	\$ 5,722,108
Total Revenues	8,086,512	5,722,108
Total Expenses*	1,725,924	1,437,978
Excess of revenue over expenses	<u>\$ 6,360,588</u>	<u>\$ 4,284,130</u>

* Total expenses include contributions of \$3,856,653 (2005 - \$1,051,221) to the RHA and amortization of \$22,236 (2005 - \$23,223)

Cash Flows

Cash from operations	\$ 1,487,845	\$ 3,795,787
Cash used in financing and investing activities*	3,790,996	(5,053,452)
Increase (Decrease) in cash	<u>\$ 5,278,841</u>	<u>\$ (1,257,665)</u>

* Investing activities include capital purchases of \$25,294 (2005 - \$25,813)

10. PATIENT AND RESIDENT TRUST ACCOUNTS

The RHA administers funds held in trust for patients and residents using the RHA's facilities. The funds are held in separate accounts for the patients or residents at each facility. The total cash held in trust as at March 31, 2007 was \$39,595 (2006 - \$42,900). These amounts are not reflected in the financial statements.

11. PENSION PLAN

Employees of the RHA participate in one of the following pension plans:

- Saskatchewan Healthcare Employees' Pension Plan (SHEPP), which is jointly governed by a board of eight trustees. Four of the trustees are appointed by the Saskatchewan Association of Health Organizations (SAHO) (a related party) and four of the trustees are appointed by Saskatchewan's health care unions (CUPE, SUN, SEIU, SGEU, RWDSU, and HSAS). SHEPP is a multi-employer defined benefit plan that came into effect December 31, 2002. Prior to December 31, 2002 this plan was the SAHO Retirement Plan and was governed by the SAHO Board of Directors.

- Regina Civic Employees' Superannuation and Benefit Plan (RCP), which is a defined benefit plan. The RCP is administered by a jointly trustee board (equal employer and employee representatives).
- Public Service Superannuation Plan (a related party), which is also a defined benefit plan. This plan is administered by a Cabinet appointed board of directors.
- Public Employees' Pension Plan (a related party) which is a defined contribution plan. This plan is administered by a Cabinet appointed board of directors.

The RHA's financial obligation to the plans is limited to making required payments to match amounts contributed by employees for current services. The RHA follows defined contribution plan accounting for its participation in these plans. Accordingly, the RHA expenses all contributions it is required to make in the year.

Pension expense for the year amounted to \$23,122,930 (2006 - \$21,107,975) which is included in benefits in Schedule 1.

12. BUDGET

The RHA Board approved the 2006-2007 budget plan on May 31, 2006.

13. INSURANCE

The RHA purchases liability insurance from Healthcare Insurance Reciprocal of Canada (the Reciprocal). Under the terms of the Subscribers' Agreement, with respect to a policy period where revenues exceed expenses, any premium surplus may be refunded to the Reciprocal's subscribers on a proportionate basis after the subscriber has been enrolled with the Reciprocal for more than four years. This is the RHA's tenth year in the agreement with the Reciprocal. Similarly, if there is a deficiency of revenues, the Reciprocal may collect such premium deficiency from its Subscribers on a proportionate basis. The Reciprocal maintains a stabilization fund to cover future deficiencies. Also, the Reciprocal is insured for claims in excess of \$1 million. There is no premium surplus for the current year and there are no claims reported that are expected to exceed the policy limits.

14. FINANCIAL INSTRUMENTS

a. Significant terms and conditions

There are no significant terms and conditions related to financial instruments classified as current assets or current liabilities that may affect the amount, timing and certainty of future cash flows. Significant terms and conditions for the other financial instruments are disclosed separately in these financial statements.

b. Credit Risk

The RHA is exposed to credit risk from the potential non-payment of accounts receivable. The majority of the RHA's receivables are from Saskatchewan Health – General Revenue Fund, Saskatchewan Cancer Foundation, health insurance companies, the Federal Government or other Provinces. Therefore, the credit risk is minimal.

c. Fair value

The following methods and assumptions were used to estimate the fair value of each class of financial instrument:

- The carrying amounts of these financial instruments approximate fair value due to their immediate or short-term nature:
 - cash and short-term investments
 - accounts receivable
 - accounts payable
 - accrued salaries and vacation payable
- For investments, the fair value of \$12,874,753 (2006 - \$10,713,172) is considered to approximate quoted market values.
- The fair value of mortgages payable before the repayment required within one year is \$2,985,061 (2006 - \$3,448,894) and is determined using discounted cash flow analysis based on current incremental borrowing rates for similar borrowing arrangements.
- For the bank overdraft and debt, fair value is considered to be their carrying amounts.

d. Operating Line-of-Credit

The RHA has an unsecured line of credit limit of \$31,514,987 approved by the Minister of Health in 1999. Interest on the outstanding balance is charged at bank prime less .75%. Total interest paid on the line of credit was \$9,644 (2006 - \$97,019).

15. INTERFUND TRANSFERS

Each year the RHA transfers amounts between its funds for various purposes. These include funding capital asset purchases, and reassigning fund balances to support certain activities.

	2007			2006		
	Operating	Capital	Community Trust	Operating	Capital	Community Trust
Capital asset purchases	\$ (3,180,959)	\$ 3,614,894	\$ (433,935)	\$ -	\$ 481,022	\$ (481,022)
SHC reserves	37,494	(37,494)	-	(93,664)	93,664	-
	<u>\$ (3,143,465)</u>	<u>\$ 3,577,400</u>	<u>\$ (433,935)</u>	<u>\$ (93,664)</u>	<u>\$ 574,686</u>	<u>\$ (481,022)</u>

16. RESTATEMENT OF PRIOR YEARS

The prior year's financial statements have been restated to reflect changes in accounting policy. Amounts due to the operating fund from the capital fund with respect to capital purchases were previously reflected in the financial statements as an amount due to the operating fund from the capital fund. The receivable in the operating fund and the corresponding payable in the capital fund have been eliminated.

The opening fund balances have been restated as follows:

	2007	2006
Operating Fund		
Opening balance as previously reported	(53,779,668)	(55,621,833)
Restatement	(8,031,898)	(8,031,898)
As restated	(61,811,566)	(63,653,731)
Capital Fund		
Opening balance as previously reported	277,437,169	283,104,665
Restatement	8,031,898	8,031,898
As restated	285,469,067	291,136,563

APPENDIX A

RQHR FACILITIES IN SQUARE FEET

REGINA:

LOCATION	SITE	Gross Sq. Ft.	LEASE/OWN
325 Victoria Ave.	Al Ritchie Health Action Centre	2,080	Lease
2110 Hamilton Street	Alcohol & Drug Services, I.T., Mental Health – Adult, Public Health Central	60,888	Lease
2024 Albert St.	Drug Treatment Court	5,500	Lease
1650 Sask. Drive	Emergency Medical Services – Station 1	4,500	Own
5730 Rochdale Blvd.	Emergency Medical Services – Station 2	1,679	Own
3705 Hill Ave.	Emergency Medical Services – Station 3	5,400	Own
445 Winnipeg St. Warehouse	Emergency Medical Services – Storage Building	5,000	Lease
1350 Albert St.	Emergency Medical Services – Future Central Operations Building	45,000	Own
400 Broad Street	Eagle Moon Health Office	2,820	Lease
3510 – 5th Ave.	Four Directions Community Health Centre	7,144	Lease
1048 Albert Street	Harm Reduction Program	1,962	Lease
2755 Avonhurst Dr.	HealthLine (Emergency Medical Services)	8,606	Lease
1080 Winnipeg St.	Health Promotion (health promotion, dental health, active living and nutrition), Population and Public Health Services	4,263	Lease
2755 Avonhurst Dr.	RQHR Warehouse	8,297	Lease
1920 Broad Street	Hearing Aid Plan	6,854	Lease
4211 Albert Street	Home Care / SWADD / Scheduling / HR / QI	33,796	Lease
1692 Albert Street	Kinship Centre (Mental Health Services)	4,000	Lease
1001 Montreal Street	Laundry Services	40,000	Own
1686/1662/1680 Albert St.	Mental Health Services - Child & Youth	16,445	Lease
4101 Dewdney Avenue	Pasqua Hospital	597,578	Own
1911 Park Street	Public Health - East Office	5,570	Lease
204 Wascana Street	Public Health – North Office	7,246	Own
1440 – 14th Avenue	Regina General Hospital	1,028,489	Own
2180 – 23rd Avenue	Wascana Rehabilitation Centre	485,070	Own
24 Regina Facilities	Total Gross Feet, Regina Facilities	2,388,187	

RURAL:

LOCATION	SITE	Gross Sq. Ft.	LEASE/OWN
100 South Elgin St., Balcarres	Balcarres Integrated Care Centre	27,940	Own
606 Main St., Broadview	Broadview / Whitewood Home Care	1,259	Own
Calgary St., Broadview	Broadview Centennial Lodge	18,998	Own
901 Nina St., Broadview	Broadview Union Hospital	17,136	Own
Box 100, Cupar, SK	Cupar Health Centre	13,608	Own
502 Windover Ave., Moosomin	Eastern Sask. Pioneer Lodge	6,956	Own
405 Windover Ave., Moosomin	Eastern Sask. Pioneer Nursing Home	15,436	Own
Box 1790, Ft. Qu'Appelle	Echo Lodge	21,128	Own
916 Eden St., Indian Head	Golden Prairie Home	23,272	Own
721 Stella St., Grenfell	Grenfell Health Centre	11,902	Own
Regina Ave., Grenfell	Grenfell Housing Units (4 duplexes)	3,627	Own
802 Wolseley Ave., Box 970	Grenfell Regional Office	3,150	Own
300 Hospital St., Indian Head	Indian Head Union Hospital	20,775	Own
Ouimet St., Wolseley	Lakeside Nursing Home	49,245	SPMC Lease
Box 180, Imperial, SK	Long Lake Valley Integrated Facility	20,325	Own
237 – 2nd Ave. E., Montmartre	Montmartre Health Centre	20,032	Own
Windover and Broadway	Moosomin Housing Units (8 duplexes, 1 four-plex)	12,250	Own
Moosomin	Moosomin Public Health	1,642	Own
320 Gertie St., Moosomin	Moosomin Union Hospital	42,690	Own
710 Regina Ave., Grenfell	Pioneer Home	17,997	Own

RURAL:

LOCATION	SITE	Gross Sq. Ft.	LEASE/OWN
Box 549, Raymore	Silver Heights Special Care Home	28,000	Own
280 Burns Ave., Box 519	Southey Health Action Centre	200	Lease
Box 280, Lestock	St. Joseph's Integrated Care Centre	14,338	Own
178 Boundary Ave.N.,Box 1819	Touchwood/Qu'Appelle District Health Centre	8,400	Own
South Railway, Wapella	Wapella Clinic Building	803	Own
921 Gambetta St., Whitewood	Whitewood Community Health Centre	16,856	Own
Ouimet St., Wolseley	Wolseley Memorial Union Hospital	13,616	Own
27 Rural Facilities	Total Gross Feet, Rural Facilities	431,581	

AFFILIATES:

LOCATION	SITE	Gross Sq. Ft.	LEASE/OWN
Fort Qu'Appelle	All Nations Healing Hospital	56,901	n/a
Box 310, Cupar	Cupar & District Nursing Home	39,166	n/a
4125 Rae St., Regina	Extendicare Elmview	18,500	n/a
4540 Rae St., Regina	Extendicare Parkside	51,977	n/a
260 Sunset Dr., Regina	Extendicare Sunset	40,000	n/a
Lumsden	Lumsden & District Heritage Home	20,000	n/a
1425 College Ave., Regina	Qu'Appelle House	28,265	n/a
1925 - 5th Ave. N., Regina	Regina Lutheran Home	60,452	n/a
430 Pioneer Dr., Regina	Regina Pioneer Village	168,000	n/a
4215 Regina Ave., Regina	Santa Maria Senior Citizens Home	107,185	n/a
50 Angus Rd.	William Booth Special Care Home	46,632	n/a
11 Affiliated Facilities	Total Gross Feet, Affiliates	637,078	

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